Image# 13941594221 PAGE 1 / 99

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

	or Other Than An A	authorized Committee		Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing over the lines.	, type 12FE4M	15
National Association of	Mutual Insurance	Companies PAC		
ADDRESS (number and street)	3601 Vincennes Road			
Check if different	PO Box 68700			
than previously reported. (ACC)	Indianapolis		IN	46268
2. FEC IDENTIFICATION NU	MBER ▼	CITY	STATE ▲	ZIP CODE ▲
C C00170258	3.	IS THIS REPORT X (N		AMENDED A)
4. TYPE OF REPORT (Choose One)	Report Due On:			Ig 20 (M8) Nov 20 (M11) (Non-Election Year Only) Pp 20 (M9) Dec 20 (M12)
(a) Quarterly Reports:				(Non-Election Year Only)
April 15 Quarterly Report (Q	1)	Apr 20 (M4) Ju	I 20 (M7) Od	et 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	PRE-Election	Primary (12P)	H	al (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the	Convention (12	PC) Specia	1 (125)
January 31 Year-End Report (Y	Fla	ection on	D D / Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day POST-Election Report for the	(111)	Runoff	(30R) Special (30S)
Termination Report (TER)	Ele	ection on	D D / Y Y Y	in the State of
5. Covering Period 08	01 201	3 through	08 31	2013
I certify that I have examined thi	s Report and to the best	of my knowledge and be	lief it is true, correct a	and complete.
Type or Print Name of Treasurer	Mr. Gregg A. Dykstra J.I	D.		
Signature of Treasurer Mr. G	iregg A. Dykstra J.D.	[Electronically 1	Filed] Date 09	M / D D / Y Y Y Y Y Y 18 2013
NOTE: Submission of false, errone	ous, or incomplete information	ation may subject the perso	n signing this Report to	the penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

Report Covering the Period: From: 08 01 2013 To: 08 31 2013

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2013		15730.04
	(b) Cash on Hand at Beginning of Reporting Period	69712.24	
	(c) Total Receipts (from Line 19)	46264.85	320673.56
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	115977.09	336403.60
7.	Total Disbursements (from Line 31)	42033.60	262460.11
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	73943.49	73943.49
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

National Association of Mutual Insurance Companies PAC

outions (other than loans) From: dividuals/Persons Other nan Political Committees Itemized (use Schedule A)	29641.24	214799.55
nan Political Committees Itemized (use Schedule A)	29641.24	214799.55
Itemized (use Schedule A)	29641.24	214799.55
	29041.24	2147 99.00
Unitemized		
/ Uniterliked	5320.08	77862.10
) TOTAL (add		
Lines 11(a)(i) and (ii)▶	34961.32	292661.65
plitical Party Committees	0.00	0.00
ther Political Committees		
uch as PACs)	11000.00	26391.42
otal Contributions (add Lines		
(a)(iii), (b), and (c)) (Carry		040050 07
otals to Line 33, page 5)▶	45961.32	319053.07
ers From Affiliated/Other		
Committees	0.00	0.00
ans Received	0.00	0.00
Demonstrate Baselined	0.00	0.00
	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	298.36	1584.04
	7	7
al Committees	0.00	0.00
Federal Receipts		
nds, Interest, etc.)	5.17	36.45
ers from Non-Federal and Levin Funds		
n-Federal Account		
om Schedule H3)	0.00	0.00
vin Funds (from Schedule H5)	0.00	0.00
al Transfers (add 18(a) and 18(b))	0.00	0.00
	cher Political Committees uch as PACs) chal Contributions (add Lines (a)(iii), (b), and (c)) (Carry chals to Line 33, page 5) chars From Affiliated/Other Committees chars Received	ther Political Committees uch as PACs)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements COLUMN A Total This Period	
	Calendar Year-to-Date
0.00	0.00
0.00	0.00
283.60	1660.11
283.60	1660.11
0.00	0.00
37500.00	258000.00
0.00	0.00
	0.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	300.00
0.00	0.00
0.00	0.00
0.00	300.00
4250.00	2500.00
0.00	0.00
0.00	0.00
0.00	0.00
0.00	0.00
	0.00
42033.60	262460.11
42033.60	262460.11
	Total This Period ,,,,,,,

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) III. Net Contributions/Operating Ex-

penditures

(from Line 11(d), page 3)

(from Line 28(d)).....

(subtract Line 34 from Line 33)

(add Line 21(a)(i) and Line 21(b))▶

(from Line 15, page 3).....

(subtract Line 37 from Line 36)

33. Total Contributions (other than loans)

35. Net Contributions (other than loans)

36. Total Federal Operating Expenditures

37. Offsets to Operating Expenditures

38. Net Operating Expenditures

34. Total Contribution Refunds

Page 5 **COLUMN A** COLUMN B **Total This Period** Calendar Year-to-Date 45961.32 319053.07 0.00 300.00 45961.32 318753.07 1660.11 283.60 298.36 1584.04 -14.76 76.07

	FOR LINE NUMBER:	PAGE 6 OF	
Use separate schedule(s)	(check only one)		
for each category of the Detailed Summary Page	X 11a 11b	11c 12	
	13 14	15 16	

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full)	d legurence Commenter DAC	
National Association of Mutua	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. John Abbott		Date of Receipt
Mailing Address PO Box 30660		08 30 2013
City	State Zip Code	Transaction ID : AE7074A5CDEF24BB4A9
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Auto-Owners Insurance Company	Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Ms. Cathy M. Adcock		Date of Receipt
Mailing Address PO Box 30660		08 04 2013
City	State Zip Code	Transaction ID : A09E034A21CBB4ED7BD
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	50.00
Name of Employer	Occupation	1
Auto-Owners Insurance Company	Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Ms. Cathy M. Adcock		Date of Receipt
Mailing Address PO Box 30660		08 30 2013
City	State Zip Code	Transaction ID : A78538738AD564F6FB24
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Manager	_
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	
SUBTOTAL of Receipts This Page (optional)		1125.00
c. necesipte this rage (optional)		7 1 7 1 7
TOTAL This Period (last page this line numb	er only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 7 OF 99

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)
	d Statements may not be sold or used by any pe the name and address of any political committee	erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Todd E. Albert Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-0111 C Occupation Chief Information Officer Aggregate Year-to-Date ▼ 510.00	Date of Receipt 08 20 2013 Transaction ID: A11F1C30B79474387A35 Amount of Each Receipt this Period 30.00
Full Name (Last, First, Middle Initial) Mr. Todd E. Albert Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-0111 C Occupation Chief Information Officer Aggregate Year-to-Date ▼ 540.00	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mr. Thomas Alighieri Mailing Address 222 Ames St City Dedham FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify)	State Zip Code MA 02026-1850 C Occupation Treasurer Aggregate Year-to-Date ▼ 320.00	Date of Receipt M M M / D D / 2013 Transaction ID : ADC2704D3CBE04BE7853 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional)		80.00
TOTAL This Period (last page this line numb	per only)	

	FOR LINE	NUMBER	: PA	ΙGΕ	8	OF
Use separate schedule(s)	(check only	/ one)				
for each category of the Detailed Summary Page	X 11a	11b	110		12	2
,	13	14	15		16	ء ا

99

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Thomas Alighieri Date of Receipt Mailing Address 222 Ames St 2013 City State Zip Code Transaction ID: A842C7A8D7D734284A4A 02026-1850 MA Dedham Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Norfolk & Dedham Mutual Fire Insurance Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Neil Alldredge Date of Receipt Mailing Address PO Box 68700 80 16 2013 City State Zip Code Transaction ID: A7192C52B136A4A1D839 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer Occupation

National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Senior Vice President - State and Poli Aggregate Year-to-Date ▼ 680.00	
Full Name (Last, First, Middle Initial) C. Mr. Neil Alldredge Mailing Address PO Box 68700		Date of Receipt
City Indianapolis FEC ID number of contributing	State Zip Code IN 46268-0700	08 23 2013 Transaction ID : A7A42EE33CE2D441E9Ca Amount of Each Receipt this Period
federal political committee. Name of Employer National Association of Mutual Insuran	Occupation Senior Vice President - State and Poli	40.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

100.00

FOR LINE NUMBER: **PAGE** (check only one) X 11a 11b 11c

9 OF 99 Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Diane Allen Date of Receipt Mailing Address 6101 Anacapri Blvd 04 2013 City State Zip Code Transaction ID: A5F9A6960683844CD9EC Lansing MI 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 55.00 federal political committee. Name of Employer Occupation Vice President-Personnel **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 440.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Diane Allen Date of Receipt Mailing Address 6101 Anacapri Blvd 08 30 2013 City State Zip Code Transaction ID: AA4EEE4FDB0CD4C87809 MI Lansing 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Vice President-Personnel Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Herman J. Arends Date of Receipt Mailing Address PO Box 30660 80 20 2013 City Zip Code State Transaction ID: AFA3C6F979AD342709FA MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 615.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Rick A. Arens Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Underwriting Manager Aggregate Year-to-Date ▼ 225.00	Date of Receipt 08 30 2013 Transaction ID: AC568E6107B1D476882A Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) Ms. Laura Grace Ashton Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2102 C Occupation PAC Manager Aggregate Year-to-Date ▼ 246.00	Date of Receipt 08 16 2013 Transaction ID: AF8D02D15188C4132BD8 Amount of Each Receipt this Period 11.50
Full Name (Last, First, Middle Initial) Ms. Laura Grace Ashton Mailing Address 122 C St NW Ste 540 City Washington FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code DC 20001-2102 C Occupation PAC Manager Aggregate Year-to-Date ▼ 257.50	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)		48.00
TOTAL This Period (last page this line numbe	er only)	

	FOR LINE I	NUMBER:	PAGE	E 11 O	F 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ago	13	14	15	16	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Lisa M Ayotte Date of Receipt Mailing Address PO Box 30660 04 2013 City State Zip Code Transaction ID: A7B9BCCE9581E49E48F2 48909-8160 MI Lansing Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation AVP- Real Estate & Operational Service **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Lisa M Ayotte Date of Receipt Mailing Address PO Box 30660 80 30 2013 City State Zip Code Transaction ID: ACC42FAF4377442B6A17 MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** AVP- Real Estate & Operational Service

Primary General Other (specify) ▼	270.00	
Full Name (Last, First, Middle Initial) Mr. Michael D. Baker Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Regional Vice President Aggregate Year-to-Date ▼ 400.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional)		110.00

Aggregate Year-to-Date ▼

TOTAL This Period (last page this line number only).....

Receipt For:

	FOR LINE NU		PAGE	12 OF	99
Use separate schedule(s) for each category of the Detailed Summary Page	(check only or	ne) 11b	11c	12	
	13	14	15	16	17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Michael D. Baker Mailing Address PO Box 30660 City Lansing	State Zip Code MI 48909-8160	Date of Receipt 08 30 2013 Transaction ID : ADE66782F5D8E4F64814 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	Occupation Regional Vice President Aggregate Year-to-Date ▼ 450.00	50.00
Full Name (Last, First, Middle Initial) Mr. Kevin Barnes Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Regional Vice President Aggregate Year-to-Date ▼ 225.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Walter Bennett Mailing Address 2300 Garden Rd City Monterey FEC ID number of contributing federal political committee. Name of Employer California Capital Insurance Company Receipt For: Primary General Other (specify)	State Zip Code CA 93940-5326 C Occupation VP Underwriting and Field Operations Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional).	>	325.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 13 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. John S. Benson Date of Receipt Mailing Address One Mutual Avenue 02 2013 City Zip Code State Transaction ID: AAB8F639B45BF44B9820 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 115.39 federal political committee. Name of Employer Occupation President, CEO & Chairman Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1846.24 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John S. Benson Date of Receipt Mailing Address One Mutual Avenue 08 16 2013 City State Zip Code Transaction ID: AFCF9D9B12F7C4C4D8B5 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 115.39 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company President, CEO & Chairman Receipt For: Aggregate Year-to-Date ▼ Primary General 1961.63 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John S. Benson Date of Receipt Mailing Address One Mutual Avenue 30 80 2013 City Zip Code State Transaction ID: A988C3FDA4E6E4150AFC MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 115.39 С federal political committee. Name of Employer Occupation President, CEO & Chairman Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 2077.02 Other (specify) 346.17 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

	FOF	R LINE	NU	IMBER	:	PAGE	•	14 OI	F	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual		
Full Name (Last, First, Middle Initial) Mr. Jake Block Mailing Address PO Box 30660		Date of Receipt
City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Director Aggregate Year-to-Date ▼ 250.00	Transaction ID: A21E61DB5BAD44D0BBA Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Clarence Boyle Sr. Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Director Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 26 2013 Transaction ID: AA6E66966942A46EC92B Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Ms. Heather Brown Mailing Address PO Box 111 City Bucyrus FEC ID number of contributing federal political committee. Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code OH 44820-0111 C Occupation Personal Lines Territory Manager Aggregate Year-to-Date ▼ 235.00	Date of Receipt 08 20 2013 Transaction ID: A7D6B52DCCC0E4766A6I Amount of Each Receipt this Period 5.00
SUBTOTAL of Receipts This Page (optional)		355.00
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	MBER	:	PAGE	. '	15 OF	=	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,		13		14		15		16		17

Any information copied from such Reports and or for commercial purposes, other than using t	I Statements may not be sold or used by any per- the name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Heather Brown Mailing Address PO Box 111		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City	State Zip Code	Transaction ID : ABA284F254C4243C6A4D
Bucyrus	OH 44820-0111	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	5.00
Name of Employer	Occupation	†
Ohio Mutual Insurance Company	Personal Lines Territory Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Ms. Tina Brumley Mailing Address Do By Google		Date of Receipt
Mailing Address PO Box 30660		08 30 _2013 _
City	State Zip Code	Transaction ID : A71D11DE8D2114B84A90
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Auto-Owners Insurance Company	Occupation Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initial) C. Mr. Bob I. Buchanan	1	Date of Receipt
Mailing Address 6101 Anacapri Blvd		08 04 2013
City Lansing	State Zip Code MI 48917-3994	Transaction ID : AA9ED3047CB17433988E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	42.00
Name of Employer	Occupation	†
Auto-Owners Insurance Company	Senior Vice President, Info. Systems &	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	336.00	
SUBTOTAL of Receipts This Page (optional).		72.00
TOTAL This Period (last page this line number	<u>^</u>	

FOR LINE NUMBER: PAGE 16 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Bob I. Buchanan Date of Receipt Mailing Address 6101 Anacapri Blvd 30 2013 City Zip Code State Transaction ID: A892C00D719AC4A9FAF5 Lansing MI 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 42.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Info. Systems & Receipt For: Aggregate Year-to-Date ▼ Primary General 378.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stephen Buell Date of Receipt Mailing Address PO Box 30660 08 30 2013 City State Zip Code Transaction ID: AFD376DC82AAC483380C MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mike Bush Date of Receipt Mailing Address PO Box 860 30 80 2013 City State Zip Code Transaction ID: ACF5F6B5151534CA29E8 AR **Bryant** 72089-0860 Amount of Each Receipt this Period FEC ID number of contributing 625.00 С federal political committee. Name of Employer Occupation Farmers Union Mutual Insurance Company Vice President/Secretary Receipt For: Aggregate Year-to-Date ▼ Primary General 1875.00 Other (specify) 692.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 17 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Ginny Caro Date of Receipt Mailing Address 3030 N 3rd St 2013 City Zip Code State Transaction ID: A6F7D683B0BC649F1B2F Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 41.66 federal political committee. Name of Employer Occupation Vice President of Claims Services CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 666.56 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 08 16 2013 City State Zip Code Transaction ID: A24951FF826E94D38923 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 2430.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 80 16 2013 City Zip Code State Transaction ID : AB92E3534F797426F96D IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President & CEO National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 2430.00 Other (specify) 231.66 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 18 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Charles M. Chamness Date of Receipt Mailing Address PO Box 68700 2013 City Zip Code State Transaction ID: ADDFD3FBD29764780835 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 90.00 federal political committee. Name of Employer Occupation President & CEO National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 2520.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Coe Date of Receipt Mailing Address PO Box 111 08 20 2013 City State Zip Code Transaction ID: A0E791E093AE949C7AD4 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 663.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mark Coe Date of Receipt Mailing Address PO Box 111 80 28 2013 City Zip Code State Transaction ID: A6F8A5500DE4E40F3960 OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 39.00 С federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company IT Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 702.00 Other (specify) 168.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 19 OF 99 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Darwin G. Copeman CPCU Date of Receipt Mailing Address PO Box 468 04 2013 City Zip Code State Transaction ID: AEE26959E18974493AE0 WI Neenah 54957-0468 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation President & CEO Jewelers Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1654.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Darwin G. Copeman CPCU Date of Receipt Mailing Address PO Box 468 80 30 2013 City State Zip Code Transaction ID: A12A6AD582DFE45EEA33 WI Neenah 54957-0468 Amount of Each Receipt this Period FEC ID number of contributing 200.00 federal political committee. Name of Employer Occupation Jewelers Mutual Insurance Company President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1854.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Gregg Cornell Date of Receipt Mailing Address 6101 Anacapri Blvd 80 20 2013 City State Zip Code Transaction ID: A65D5C403AAD54CEDAD2 MI Lansing 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1400.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOR LINE I	NUMBER:	: PAGI	E 20 OF	= 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ugo	13	14	15	16	\square_1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. William C. Craine Mailing Address 1 Preferred Way		Date of Receipt
City	State 7's Code	08 09 2013
City New Berlin	State Zip Code NY 13411-1896	Transaction ID : A2B14095A212F4889864
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	
Preferred Mutual Insurance Company	Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) 3. Mr. Dan DeArment		Date of Receipt
Mailing Address PO Box 646		M = M / D = D / Y = Y = Y
City	State Zip Code	08 20 2013
Bedford	PA 15522-0646	Transaction ID : A3EE84FAAE0984B6CBA8 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Friends Cove Mutual Insurance Company	President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial)		Date of Breedy
Mr. Rick DeGraw Mailing Address 3030 N 3rd St		Date of Receipt
Maining Address 3030 N 3rd St	ı	08 23 2013
City Phoenix	State Zip Code AZ 85012-3074	Transaction ID : AA766B0D020AD4DCAB7 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	41.59
Name of Employer	Occupation	
CopperPoint Mutual Insurance Company	COO & Senior Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	666.64	
SUBTOTAL of Receipts This Page (optional).		791.59
	·	
TOTAL This Period (last page this line numb	er only)	

	FO	R LINE	NU	MBER	:	PAGE	: 2	21 OF	F	99
Use separate schedule(s)	(ch	eck only	or or	ne)						
for each category of the Detailed Summary Page	>	11a		11b		11c		12		
_ come common , ange		13		14		15		16		17

	Statements may not be sold or used by any perse name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Robert Detlefsen PhD Mailing Address PO Box 68700		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Vice President - Public Policy Aggregate Year-to-Date ▼ 739.16	Transaction ID : A8F2A145A0575476FA2C Amount of Each Receipt this Period 43.48
Full Name (Last, First, Middle Initial) Mr. Robert Detlefsen PhD Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Vice President - Public Policy Aggregate Year-to-Date ▼ 782.64	Date of Receipt 08 23 2013 Transaction ID: A18C54DAF78ED4C12925 Amount of Each Receipt this Period 43.48
Full Name (Last, First, Middle Initial) Mr. Martin M. Doto CPCU, MSIM Mailing Address 1 Preferred Way City New Berlin FEC ID number of contributing federal political committee. Name of Employer Preferred Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code NY 13411-1896 C Occupation Senior Vice President Insurance Operat Aggregate Year-to-Date ▼ 1001.00	Date of Receipt 08 22 2013 Transaction ID: A6282C8D7D9504338B92 Amount of Each Receipt this Period 1001.00
SUBTOTAL of Receipts This Page (optional)	>	1087.96
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	MBER	:	PAGE	2	22 OF	=	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	×	11a		11b		11c		12		
,		13		14		15		16		17

	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
National Association of Mutual	insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Charles W. Drier		Date of Receipt
Mailing Address PO Box 30660		08
City Lansing	State Zip Code MI 48909-8160	Transaction ID : AA9D9E00CAF824F078A6 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Regional Vice President Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Mr. Charles W. Drier Mailing Address PO Box 30660		Date of Receipt
City Lansing FEC ID number of contributing federal political committee.	State Zip Code MI 48909-8160	08 30 2013 Transaction ID : AE3AFD6E50AD74BF1B3 Amount of Each Receipt this Period 75.00
Name of Employer Auto-Owners Insurance Company Receipt For: □ Primary □ General Other (specify) ▼	Occupation Regional Vice President Aggregate Year-to-Date ▼ 675.00	
Full Name (Last, First, Middle Initial) Mr. Gregg A. Dykstra J.D. Mailing Address 3601 Vincennes Rd City Indianapolis	State Zip Code IN 46268-1154	Date of Receipt 08 16 2013 Transaction ID : AB8EFD49EF3D74247AE9 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	96.16
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Chief Operating Officer Aggregate Year-to-Date ▼ 1634.72	
SUBTOTAL of Receipts This Page (optional)	>	246.16
	er only)	

	FO	FOR LINE NUMBER: PAGE 23 OF										
Use separate schedule(s) for each category of the Detailed Summary Page	(ch	(check only one)										
	>	11a		11b		11c		12				
		13		14		15		16		17		

Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Gregg A. Dykstra J.D. Mailing Address 3601 Vincennes Rd		Date of Receipt
City	State Zip Code	08 23 2013 Transaction ID : A55DAEC89DBE44EFDB17
Indianapolis	IN 46268-1154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	96.16
Name of Employer	Occupation	
National Association of Mutual Insuran	Chief Operating Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1730.88	
Full Name (Last, First, Middle Initial) Mr. Fred A. Edmond CPCU, CIC		Date of Receipt
Mailing Address One Mutual Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	08 02 2013 Transaction ID : A37DED93BCAC348E691A
Frankenmuth	MI 48787-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	Vice President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1232.00	
Full Name (Last, First, Middle Initial) C. Mr. Fred A. Edmond CPCU, CIC		Date of Descipt
Mailing Address One Mutual Avenue		Date of Receipt 08 16 2013
City Frankenmuth	State Zip Code MI 48787-0001	Transaction ID : A5BEB8758578B4F74AAC Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	77.00
Name of Employer	Occupation	
Frankenmuth Mutual Insurance Company	Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1309.00	
SUBTOTAL of Receipts This Page (optional)	>	250.16
TOTAL This Period (last page this line number	only)	

	FOR	LINE	NU	MBER	:	PAGE	2	24 O	F	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

	Statements may not be sold or used by any pers ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Fred A. Edmond CPCU, CIC Mailing Address One Mutual Avenue City Experience with	State Zip Code MI 48787-0001	Date of Receipt 08 30 2013 Transaction ID: A8778D898D0AD47EA98C
Frankenmuth FEC ID number of contributing federal political committee. Name of Employer Frankenmuth Mutual Insurance Company Receipt For: Primary General Other (specify)	MI 48787-0001 C Occupation Vice President Aggregate Year-to-Date ▼ 1386.00	Amount of Each Receipt this Period 77.00
Full Name (Last, First, Middle Initial) Mr. David B. Emerson Mailing Address 1 Preferred Way City New Berlin	State Zip Code NY 13411-1896	Date of Receipt 08 09 2013 Transaction ID: A922DE5EA9A424359B58
FEC ID number of contributing federal political committee. Name of Employer Preferred Mutual Insurance Company Receipt For: Primary General	Occupation Director Aggregate Year-to-Date ▼	Amount of Each Receipt this Period 500.00
Other (specify) Full Name (Last, First, Middle Initial) Mr. Andrew M. Eriksen	500.00	Date of Receipt
Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Assistant Vice President Aggregate Year-to-Date 800.00	Date of Receipt M M M
SUBTOTAL of Receipts This Page (optional)	<u> </u>	677.00
TOTAL This Period (last page this line number	r only)	

	FOF	LINE	NU	MBER	PAGE	2	25 O	F	99	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	d Statements may not be sold or used by any pers the name and address of any political committee t	
NAME OF COMMITTEE (In Full)	al Insurance Companies PAC	
/	ai insurance companies FAC	
Full Name (Last, First, Middle Initial) Mr. Andrew M. Eriksen		Date of Receipt
Mailing Address PO Box 30660		08 30 2013
City	State Zip Code	Transaction ID : AFFD1AC9ED7244D1D96F
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Assistant Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	900.00	
Full Name (Last, First, Middle Initial) 3. Mr. Stephen F. Fabian	1	Date of Receipt
Mailing Address 200 N Main St		08 09 2013
City	State Zip Code	Transaction ID : A76BADE64F71B46BA8C4
Bel Air	MD 21014-3544	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer	Occupation	1
Harford Mutual Insurance Company	Vice President, Chief Information Offi	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 666.70	
Full Name (Last, First, Middle Initial) C. Mr. Stephen F. Fabian	·	Date of Receipt
Mailing Address 200 N Main St		08 30 2013
City	State Zip Code	Transaction ID : ABE7EED5A4C30428EA04
Bel Air	MD 21014-3544	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	111.12
Name of Employer	Occupation	
Harford Mutual Insurance Company	Vice President, Chief Information Offi	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	777.82	
SUBTOTAL of Receipts This Page (optional)) >	322.24
TOTAL This Period (last page this line numb	per only)	
/ 13	***	

FOR LINE NUMBER: PAGE 26 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Eileen Fhaner AIAF, CPCU Date of Receipt Mailing Address 6101 Anacapri Blvd 20 2013 City Zip Code State Transaction ID: A795E0D2F8DDD4649ABA Lansing MI 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Treasurer & CFO Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Gayle Fisher Date of Receipt Mailing Address PO Box 30660 80 04 2013 City State Zip Code Transaction ID: AEAA229454BD047E494A MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 60.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President-Life Operatio Receipt For: Aggregate Year-to-Date ▼ Primary General 480.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Gayle Fisher Date of Receipt Mailing Address PO Box 30660 80 30 2013 City Zip Code State Transaction ID: AB0B81F7F20D6419E8CE MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 65.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President-Life Operatio Receipt For: Aggregate Year-to-Date ▼ Primary General 545.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 27 OF 99

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Statemer or for commercial purposes, other than using the name		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) National Association of Mutual Insur	ance Companies PAC	
Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt For: Primary General Other (specify) ▼ Other	ate Zip Code 61125-0626 upation Underwriting regate Year-to-Date ▼ 216.20	Date of Receipt 08 09 2013 Transaction ID: A220E099761424AC697B Amount of Each Receipt this Period 38.48
Rockford FEC ID number of contributing federal political committee. Name of Employer Rockford Mutual Insurance Company Receipt Form	ate Zip Code 61125-0626 upation Underwriting regate Year-to-Date ▼ 254.68	Date of Receipt 08 28 2013 Transaction ID : AFB1CA4089C14452D97F Amount of Each Receipt this Period 38.48
Fayetteville FEC ID number of contributing federal political committee. Name of Employer Washington County Farmers Mutual Fire Property Fore	ate Zip Code R 72702-1050 upation eral Manager regate Year-to-Date ▼ 291.66	Date of Receipt 08 30 2013 Transaction ID: A83B80DFC99194C5D8EC Amount of Each Receipt this Period 125.00
SUBTOTAL of Receipts This Page (optional)	>	201.96

	FOF	R LINE	NU	IMBER	:	PAGE	2	28 OI	F	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Donald Fry Mailing Address 200 N Main St		Date of Receipt
City	State Zip Code	08 26 2013 Transaction ID : AA0C1ERR52CC1/35193C
Bel Air	MD 21014-3544	Transaction ID : AA0C1EBB52CC1435193C Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	†
Harford Mutual Insurance Company	Director	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Benjamin Galloway		Date of Receipt
Mailing Address PO Box 618		08 00 2013
City	State Zip Code	08 09 2013 Transaction ID : A1B1AF28D004B4B04A8B
Columbia	MO 65205-0618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	1
Columbia Mutual Insurance Company	SVP & CRO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	
Full Name (Last, First, Middle Initial)		Part of Parties
Mailing Address PO Box 618		Date of Receipt 08 22 2013
City Columbia	State Zip Code MO 65205-0618	Transaction ID : AEA9E89EA47784E99B10 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer	Occupation	†
Columbia Mutual Insurance Company	SVP & CRO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	245.00	
SUBTOTAL of Receipts This Page (optional)	>	150.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 29 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Randy Gerdes Date of Receipt Mailing Address 3030 N 3rd St 2013 City Zip Code State Transaction ID: A07E85187ECB74608BD5 Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Name of Employer Occupation Vice President of Strategy CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 333.28 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Bryan Gilleland Date of Receipt Mailing Address One Mutual Avenue 08 02 2013 City State Zip Code Transaction ID: AD055A55FF67E4DC8A55 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 615.52 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Bryan Gilleland Date of Receipt Mailing Address One Mutual Avenue 80 16 2013 City State Zip Code Transaction ID: A452D689DCCB84831A6E MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 653.99 Other (specify) 97.62 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 30 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

99

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Bryan Gilleland Date of Receipt Mailing Address One Mutual Avenue 30 2013 City Zip Code State Transaction ID: AB70D9F7DAC6E4194BA6 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Human Resources Receipt For: Aggregate Year-to-Date ▼ Primary General 692.46 Other (specify) Full Name (Last, First, Middle Initial) **B.** Mr. Jimi Grande Date of Receipt Mailing Address 122 C St NW Ste 540 08 16 2013 City State Zip Code Transaction ID: AF3E7F1C184824871AE8 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 113.64 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Senior Vice President-Federal and Poli Receipt For: Aggregate Year-to-Date ▼ Primary General 1476.58 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jimi Grande Date of Receipt Mailing Address 122 C St NW Ste 540 80 23 2013 City Zip Code State Transaction ID: AEA395E93D1234113A61 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 113.64 С federal political committee. Name of Employer Occupation Senior Vice President-Federal and Poli National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 1590.22 Other (specify) 265.75 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

-9

FOR LINE NUMBER: PAGE 31 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jonathan C. Grether MSIM, CPCU Date of Receipt Mailing Address PO Box 370 30 2013 City Zip Code State Transaction ID: A377F58B681EC487AAFF Algona IΑ 50511-0370 Amount of Each Receipt this Period FEC ID number of contributing C 125.00 federal political committee. Name of Employer Occupation COO Pharmacists Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 375.00 Other (specify) Full Name (Last, First, Middle Initial) **B.** Ms. Alice Hamm Date of Receipt Mailing Address PO Box 30660 08 04 2013 City State Zip Code Transaction ID: A425DAF7507DB43EA8F7 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Alice Hamm Date of Receipt Mailing Address PO Box 30660 30 80 2013 City State Zip Code Transaction ID: AC460880190C04137B47 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) 185.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LII	NE NU	IMBER:	:	PAGE	3	32 O	F			
Use separate schedule(s)	(check only one)										
for each category of the Detailed Summary Page	`X 118	a 🗀	11b		11c		12				
,	13		14		15		16	ſ			

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. James Hardesty Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Vice Chairman Aggregate Year-to-Date ▼ 400.00	Date of Receipt 08 26 2013 Transaction ID: A42AF5B6E3B024471B48 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Mr. Stephen A. Harris CPCU Mailing Address PO Box 9 City Cobleskill FEC ID number of contributing federal political committee. Name of Employer Sterling Insurance Company Receipt For: Primary General Other (specify)	State Zip Code NY 12043-0009 C Occupation President & CEO Aggregate Year-to-Date ▼	Date of Receipt 08 22 2013 Transaction ID : AFA499C4A93FD40418AB Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Mailing Address 222 Ames St City Dedham FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify)	State Zip Code MA 02026-1850 C Occupation President & CEO Aggregate Year-to-Date 320.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)	>	370.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 33 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. F. Timothy Hegarty Jr., CPCU Date of Receipt Mailing Address 222 Ames St 2013 City Zip Code State Transaction ID: AAE6D14F34C1C4620A5C Dedham MA 02026-1850 Amount of Each Receipt this Period FEC ID number of contributing 20.00 federal political committee. Name of Employer Occupation President & CEO Norfolk & Dedham Mutual Fire Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 340.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. David F. Honold Date of Receipt Mailing Address One Mutual Avenue 80 02 2013 City State Zip Code Transaction ID: A2F25D334DAE14058A64 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 76.93 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 1230.88 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Mark Hooper Date of Receipt Mailing Address PO Box 30660 80 07 2013 City Zip Code State Transaction ID: A269127960D2E4C8DBC9 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Partner Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 596.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... -9

	FOF	R LINE	NU	MBER	PAGE		99				
Use separate schedule(s)	(che	(check only one)									
for each category of the Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16		17	

	Statements may not be sold or used by any perse name and address of any political committee t					
NAME OF COMMITTEE (In Full) National Association of Mutual						
Full Name (Last, First, Middle Initial) Mr. Wesley D. Jackson AIC, PFMM Mailing Address PO Box 6106		Date of Receipt				
		08 16 2013				
City	State Zip Code	Transaction ID : AB7D29DDFE81142ED89F				
Temple	TX 76503-6106	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C	250.00				
Name of Employer	Occupation	1				
RVOS Farm Mutual Insurance Company	Vice President					
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼					
	250.00					
Full Name (Last, First, Middle Initial) 3. Ms. Theresa Jakubick		Date of Receipt				
Mailing Address PO Box 111		08 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State Zip Code	Transaction ID: A84EB45CB3F2A4BBDB59				
Bucyrus	OH 44820-0111	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	20.00				
Name of Employer	Occupation	1				
Ohio Mutual Insurance Company	Project Manager					
Receipt For:	Aggregate Year-to-Date ▼					
Primary General Other (specify) ▼	340.00					
Full Name (Last, First, Middle Initial) C. Ms. Theresa Jakubick		Date of Receipt				
Mailing Address PO Box 111		08 28 2013				
City	State Zip Code	Transaction ID : AED6651636A0A475F8A6				
Bucyrus	OH 44820-0111	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С	20.00				
Name of Employer	Occupation	1				
Ohio Mutual Insurance Company	Project Manager					
Receipt For:	Aggregate Year-to-Date ▼	1				
Primary General Other (specify) ▼	360.00					
SUBTOTAL of Receipts This Page (optional)	•	290.00				
TOTAL This Period (last page this line number	only)					

FOR LINE NUMBER: PAGE 35 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Lee A. Janis III Date of Receipt Mailing Address PO Box 30660 07 2013 City Zip Code State Transaction ID: AF110DAAC090B49F2BD9 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Vice President of Sales **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jon Jorgensen Date of Receipt Mailing Address PO Box 30660 80 04 2013 City State Zip Code Transaction ID: A5618AF7160F24BD2BBF MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Jon Jorgensen Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: AFB0ADD25B729496295F MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 31.25 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 271.25 Other (specify) 311.25 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:				PAGE	= 3	36	OF	99	
	(check only one)									
	>	K 11a		11b		11c		12		
,		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Margaret Kapka Date of Receipt Mailing Address 250 Main St 20 2013 City Zip Code State Transaction ID : A4E523E5C08654D0E816 NY Buffalo 14202-4188 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation VP Corporate Service Merchants Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Thomas Karol Date of Receipt Mailing Address 122 C St NW Ste 540 08 16 2013 City State Zip Code Transaction ID: A5A0BCC58469D42449FA DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 45.46 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 545.52 Other (specify) Full Name (Last, First, Middle Initial) **c.** Mr. Thomas Karol Date of Receipt Mailing Address 122 C St NW Ste 540 80 23 2013 City Zip Code State Transaction ID: AFD0EFD9830484925997 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 45.46 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Federal Affairs Counsel Receipt For: Aggregate Year-to-Date ▼ Primary General 590.98 Other (specify) 340.92 SUBTOTAL of Receipts This Page (optional).....

- 9

TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 37 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Frank P. Kellner III Date of Receipt Mailing Address 200 N Main St 09 2013 City Zip Code State Transaction ID: AA9EA1DBAB27D40728A9 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 55.56 federal political committee. Name of Employer Occupation Vice President, Claims Harford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 333.36 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Frank P. Kellner III Date of Receipt Mailing Address 200 N Main St 08 30 2013 City State Zip Code Transaction ID: A9B55E69465B7417285C MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 55.56 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Vice President, Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 388.92 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Drew A. Klasing Date of Receipt Mailing Address PO Box 30660 80 04 2013 City Zip Code State Transaction ID: A42E3486178494D09983 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Manager, Home Office Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 151.12 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 38 OF 99 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Drew A. Klasing Date of Receipt Mailing Address PO Box 30660 30 2013 City Zip Code State Transaction ID: AFD78F5FF3E6D435489B Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation Manager, Home Office Claims **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Kraig T. Klopfenstein Date of Receipt Mailing Address PO Box 30660 08 04 2013 City State Zip Code Transaction ID: A5A18A186202B420EBA3 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 600.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kraig T. Klopfenstein Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: ABE011A291054433F968 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Sales/Marketing Receipt For: Aggregate Year-to-Date ▼ Primary General 675.00 Other (specify) 195.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR LINE N	NUMBER:	PAGE	E 39 O	9 F
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
Dotailou Guilliary i ago	13	1 4	15	16	

Any information copied from such Reports and sor for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Andrew Knudsen Mailing Address One Mutual Avenue		Date of Receipt
City	State Zip Code	08 02 2013
Frankenmuth	MI 48787-0001	Transaction ID : A7CD2D7C55BD84CE1899 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	38.00
Name of Employer	Occupation	1
Frankenmuth Mutual Insurance Company	Vice President, Claims]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 570.00	
Full Name (Last, First, Middle Initial) 3. Mr. Andrew Knudsen		Date of Receipt
Mailing Address One Mutual Avenue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	08 16 2013 Transaction ID : A1F36EF2AE9DF44DC856
Frankenmuth	MI 48787-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer	Occupation	-
Frankenmuth Mutual Insurance Company	Vice President, Claims]
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 608.00	
Full Name (Last, First, Middle Initial)		
Mr. Andrew Knudsen		Date of Receipt
Mailing Address One Mutual Avenue		08 30 2013 _
City Frankenmuth	State Zip Code MI 48787-0001	Transaction ID : A04C3EE6737E14026B81 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.00
Name of Employer	Occupation	1
Frankenmuth Mutual Insurance Company	Vice President, Claims]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	646.00	
SUBTOTAL of Receipts This Page (optional)		114.00
TOTAL This Period (last page this line number	only)	

	FOF	R LINE	NU	IMBER	PAGE	_	10 O	F	99	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		٦1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Steve J. Knutson ARe, CPCU Date of Receipt Mailing Address PO Box 308 2013 City Zip Code State Transaction ID: A7FB1FE8DAB6E40B9AB0 MN Esko 55733-0308 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation **RAM Mutual Insurance Company** President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Pam Lahodny Date of Receipt Mailing Address 500 Hwy. 77-A 08 09 2013 City State Zip Code Transaction ID: A1876B4BB8A2D4AE9916 TX Yoakum 77995 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Hochheim Prairie Farm Mutual Insurance Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Justin L. Lear PFMM Date of Receipt Mailing Address PO Box 396 30 80 2013 City Zip Code State Transaction ID: A04A8D28256F54F8E9B1 KS Ellinwood 67526-0396 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee.

SUBTOTAL of Receipts This Page (optional)				7		7	I	5	30.0	00	
TOTAL This Period (last page this line number only)		_	_	7	 	7	Ξ		_	_]

250.00

Occupation CEO

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

Receipt For:

Farmers Mutual Insurance Company

General

	FOR LINE	E NUMBER	:	PAGE	4	1 0	F
Use separate schedule(s)	(check on	ly one)					
for each category of the Detailed Summary Page	X 11a	11b		11c		12	
	13	14		15		16	Г

or for commercial purposes, other than using the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Joe R. Liddle Mailing Address 2523 Meadow Creek Rd	Date of Receipt
City State Zip Code	08 30 2013 Transaction ID : A846A2550207E44AA82F
Galax VA 24333-4671 FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period 250.00
Name of Employer Grayson Carroll Wythe Mutual Insurance Occupation Secretary/Treasurer	
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) 3. Mr. Steven D. Linkous	Date of Receipt
Mailing Address 200 N Main St City State Zip Code Bel Air MD 21014-3544 FEC ID number of contributing federal political committee. Name of Employer Occupation President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1563.00	Transaction ID: AFA8BF1D7F07B4683910 Amount of Each Receipt this Period 209.00
Full Name (Last, First, Middle Initial) Mr. Kevin Lucke Mailing Address PO Box 219	Date of Receipt
City State Zip Code Sublimity OR 97385-0219 FEC ID number of contributing federal political committee. Name of Employer Occupation Sublimity Insurance Company Claims Professional Receipt For: Aggregate Year-to-Date ▼	08 20 2013 Transaction ID : ADA4B8DA1E2A7483E929 Amount of Each Receipt this Period 250.00
Other (specify) ▼ 250.00 SUBTOTAL of Receipts This Page (optional)	709.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 42 OF 99 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Tim Lynch Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Assistant Vice President Aggregate Year-to-Date ▼	Date of Receipt 08 04 2013 Transaction ID: AA2344630759D41C0848 Amount of Each Receipt this Period 35.00
Full Name (Last, First, Middle Initial) Mr. Tim Lynch Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Assistant Vice President Aggregate Year-to-Date ▼ 321.63	Date of Receipt 08 30 2013 Transaction ID: A0F9480A61CED4BF38DE Amount of Each Receipt this Period 41.63
Full Name (Last, First, Middle Initial) Ms. Rae Malesh Mailing Address PO Box 68700 City Indianapolis FEC ID number of contributing federal political committee. Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify)	State Zip Code IN 46268-0700 C Occupation Assistant to the President Aggregate Year-to-Date ▼	Date of Receipt 08 16 2013 Transaction ID : AFFDB73320982408FB58 Amount of Each Receipt this Period 13.50
SUBTOTAL of Receipts This Page (optional)		90.13
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 43 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Rae Malesh Date of Receipt Mailing Address PO Box 68700 2013 City Zip Code State Transaction ID: AA91F6D3AF6744E31B52 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 13.50 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Assistant to the President Receipt For: Aggregate Year-to-Date ▼ Primary General 243.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Diane Marshall Date of Receipt Mailing Address PO Box 30660 08 04 2013 City State Zip Code Transaction ID: A8BE3779013714BD0929 MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 800.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Diane Marshall Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: A3F7B5B1CADEC497EBE6 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 900.00 Other (specify) 213.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 44 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

99

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Joel Matthies Date of Receipt Mailing Address PO Box 468 04 2013 City Zip Code State Transaction ID: A4C7F484025EC48FEB62 WI Neenah 54957-0468 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Vice President - Information Technolog Jewelers Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 330.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joel Matthies Date of Receipt Mailing Address PO Box 468 08 30 2013 City State Zip Code Transaction ID: A1C0B2B8DBE814174B83 WI Neenah 54957-0468 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation Jewelers Mutual Insurance Company Vice President - Information Technolog Receipt For: Aggregate Year-to-Date ▼ Primary General 370.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 02 80 2013 City State Zip Code Transaction ID: A87D81EFF5A98482EBB6 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 С federal political committee. Name of Employer Occupation Vice President, IT Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 615.52 Other (specify) 118.47 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 45 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 2013 16 City Zip Code State Transaction ID: A70DB9EC0A2494B3798C Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Vice President, IT Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 653.99 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Phil McCain Date of Receipt Mailing Address One Mutual Avenue 08 30 2013 City State Zip Code Transaction ID: AFAB4FC835E864A729F9 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.47 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, IT Receipt For: Aggregate Year-to-Date ▼ Primary General 692.46 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Robert McDorman Date of Receipt Mailing Address 200 N Main St 80 26 2013 City Zip Code State Transaction ID: A591C95235678443C9C0 MD Bel Air 21014-3554 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 176.94 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 46 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 04 2013 City Zip Code State Transaction ID: AC5277E031E5D4B149BB Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Sherry L. McKenzie AAM, AIS Date of Receipt Mailing Address PO Box 30660 80 30 2013 City State Zip Code Transaction ID: A2EEEC48A32EC4A52B7B MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 475.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Brian S. McLeod Date of Receipt Mailing Address One Mutual Avenue 80 02 2013 City Zip Code State Transaction ID: A47E3B8BE5A034352B86 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.50 С federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 616.00 Other (specify) 163.50 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 47 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Brian S. McLeod Date of Receipt Mailing Address One Mutual Avenue 2013 City Zip Code State Transaction ID: A2BBABACF8DF94FB9AE Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 654.50 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Brian S. McLeod Date of Receipt Mailing Address One Mutual Avenue 08 30 2013 City State Zip Code Transaction ID: A7751D11D70C24FC0819 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 38.50 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President, Secretary & Treasurer Receipt For: Aggregate Year-to-Date ▼ Primary General 693.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John Menzies III Date of Receipt Mailing Address 200 N Main St 80 26 2013 City Zip Code State Transaction ID: AC14CF3F0505C402C941 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 177.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

FOR LINE NUMBER: PAGE 48 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

99

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Albert Mezzanotte Jr. Date of Receipt Mailing Address 200 N Main St 2013 26 City Zip Code State Transaction ID: A032A625414E2439C819 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Scott A. Michael Date of Receipt Mailing Address PO Box 30660 80 04 2013 City State Zip Code Transaction ID: A0732E8086A8B4FA6B25 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** AVP - Personal Lines Auto Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Scott A. Michael Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: AE66D9B844FE742BAA3E MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation AVP - Personal Lines Auto Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) 170.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOR	LINE I	ΝU	MBER	PAGE	-	49 OF	=	99	
Use separate schedule(s)	(ched	k only	on	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
_ common common, conge		13		14		15		16		17

Any information copied from such Reports and S or for commercial purposes, other than using the		
NAME OF COMMITTEE (In Full) National Association of Mutual I		
Full Name (Last, First, Middle Initial) A. Mr. David Middleton		Date of Receipt
Mailing Address PO Box 68700		08 16 2013
City Indianapolis FEC ID number of contributing	State Zip Code IN 46268-0700	Transaction ID : AF497DF49F4D3490B84E Amount of Each Receipt this Period
federal political committee.	C	40.00
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Vice President - Finance Aggregate Year-to-Date ▼ 680.00	
Full Name (Last, First, Middle Initial) Mr. David Middleton Mailing Address PO Box 68700		Date of Receipt
City Indianapolis FEC ID number of contributing federal political committee.	State Zip Code IN 46268-0700	08 23 2013 Transaction ID: A298B831A912944D3A49 Amount of Each Receipt this Period 40.00
Name of Employer National Association of Mutual Insuran Receipt For: Primary General Other (specify) ▼	Occupation Vice President - Finance Aggregate Year-to-Date ▼ 720.00	
Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Mailing Address 1725 Hopley Ave City Bucyrus	State Zip Code OH 44820-3569	Date of Receipt M
FEC ID number of contributing federal political committee.	C 44020*3309	Amount of Each Receipt this Period 45.00
Name of Employer Ohio Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	Occupation Assistant Vice President-Quality Servi Aggregate Year-to-Date ▼ 730.00	
SUBTOTAL of Receipts This Page (optional)	>	125.00
TOTAL This Period (last page this line number	<u>r_</u>	

	FOF	R LINE	NU	MBER	PAGE	50 C)F	99	
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
,		13		14		15	16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Dona L. Mohr Date of Receipt Mailing Address 1725 Hopley Ave 2013 28 City State Zip Code Transaction ID: A78A56E7945AF4DB88F0 OH 44820-3569 Bucyrus Amount of Each Receipt this Period FEC ID number of contributing C 45.00 federal political committee. Name of Employer Occupation Ohio Mutual Insurance Company Assistant Vice President-Quality Servi Receipt For: Aggregate Year-to-Date ▼ Primary General 775.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Carolyn B. Muller Date of Receipt Mailing Address PO Box 30660 80 04 2013 City State Zip Code Transaction ID: A594268A6ED08432FBAE MΙ 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing C 30.00 federal political committee. Name of Employer Occupation

Auto-Owners Insurance Company Receipt For: Primary General Other (specify) ▼	AVP-Regional Sales Operations Aggregate Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) C. Ms. Carolyn B. Muller Mailing Address PO Box 30660		Date of Receipt 08 30 2013
City	State Zip Code	Transaction ID : A2276AE8675634FC1968
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	AVP-Regional Sales Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

105.00

	FOF	R LINE	NU	IMBER	PAGE	. 5	51 C)F	99	
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Full Name (Last, First, Middle Initial)

/	1	
Full Name (Last, First, Middle Initial) Mr. Joel P. Murray		Date of Receipt
Mailing Address 222 Ames St		08 07 / Y = Y = Y = Y
City Dedham	State Zip Code MA 02026-1850	Transaction ID: A79D6AE015475470EB1E Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Norfolk & Dedham Mutual Fire Insurance	Occupation Vice President, Personal Lines & Marke	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	
Full Name (Last, First, Middle Initial) Mr. Joel P. Murray		Date of Receipt
Mailing Address 222 Ames St		08 23 2013
City Dedham	State Zip Code MA 02026-1850	Transaction ID : AD8542C2BAF3A4085A39 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	20.00
Name of Employer Norfolk & Dedham Mutual Fire Insurance	Occupation Vice President, Personal Lines & Marke	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	
Full Name (Last, First, Middle Initial) C. Ms. Katherine Noirot		Date of Receipt
Mailing Address PO Box 30660		08 30 2013
City Lansing	State Zip Code MI 48909-8160	Transaction ID: A741E616FF2F04DAAA4A Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	750.00
Name of Employer Auto-Owners Insurance Company	Occupation Senior Vice President, Marketing & Sal	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	
SUBTOTAL of Receipts This Page (optional).		790.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 52 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

99

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Robert F. Ohler Date of Receipt Mailing Address 200 N Main St 09 2013 City Zip Code State Transaction ID: A8D1E7230CEE44F41A9F MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 111.12 federal political committee. Name of Employer Occupation Senior Vice President Harford Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 666.70 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Robert F. Ohler Date of Receipt Mailing Address 200 N Main St 08 30 2013 City State Zip Code Transaction ID: A42B13657FA9743CD837 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 111.12 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Senior Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 777.82 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Angela Panowicz Date of Receipt Mailing Address 200 N Main St 30 80 2013 City Zip Code State Transaction ID: A9DD280C1CC4748C1AE7 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 27.78 С federal political committee. Name of Employer Occupation Harford Mutual Insurance Company **Underwriting Supervisor** Receipt For: Aggregate Year-to-Date ▼ Primary General 215.08 Other (specify) 250.02 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	5	3 O	F	99
Use separate schedule(s)	(che	ck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		117

Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	I Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Ms. Sandra G. Parrillo CPCU Mailing Address PO Box 6066 City Providence FEC ID number of contributing federal political committee. Name of Employer Providence Mutual Fire Insurance Compa Receipt For: Primary General Other (specify)	State Zip Code RI 02940-6066 C Occupation President & CEO Aggregate Year-to-Date ▼	Date of Receipt 08 26 2013 Transaction ID: A975634C6B7224AB0898 Amount of Each Receipt this Period 2500.00
Full Name (Last, First, Middle Initial) Mr. John A. Paul PFMM Mailing Address PO Box 498 City Council Bluffs	State Zip Code IA 51502-0498	Date of Receipt M M
FEC ID number of contributing federal political committee. Name of Employer Western Iowa Mutual Insurance Associat	Occupation	Amount of Each Receipt this Period 100.00
Receipt For: Primary Other (specify)	President Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) Mr. Mike Pike Mailing Address PO Box 30660		Date of Receipt
City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Human Resources Professional Aggregate Year-to-Date 240.00	Transaction ID : AF3CAA74FC7454835AFD Amount of Each Receipt this Period 30.00
SUBTOTAL of Receipts This Page (optional).		2630.00
TOTAL This Period (last page this line number	er only)	

	FOR LINE NUMBER: PAGE 54 (ノト
Use separate schedule(s)	(check only one)	
for each category of the Detailed Summary Page	X 11a 11b 11c 12	
	13 14 15 16	

	and Statements may not be sold or used by any persing the name and address of any political committee	
NAME OF COMMITTEE (In Full) National Association of Mu	tual Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Mike Pike Mailing Address PO Box 30660		Date of Receipt
City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General	State Zip Code MI 48909-8160 C Occupation Human Resources Professional Aggregate Year-to-Date ▼	08
Other (specify) ▼ Full Name (Last, First, Middle Initial) Ms. June A. Poole A.I.A.F. Mailing Address 200 N Main St	275.00	Date of Receipt
City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company	State Zip Code MD 21014-3544 C Occupation Vice President &Treasurer	Transaction ID: A3DD21ABB69FB4646B61 Amount of Each Receipt this Period 27.78
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 222.24	
Full Name (Last, First, Middle Initial) Ms. June A. Poole A.I.A.F. Mailing Address 200 N Main St City Bel Air FEC ID number of contributing federal political committee. Name of Employer Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Vice President &Treasurer Aggregate Year-to-Date ▼ 250.02	Date of Receipt Mark
SUBTOTAL of Receipts This Page (option	onal)	90.56
TOTAL This Period (last page this line n	umber only)	

FOR LINE NUMBER: PAGE 55 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Barry Preslaski Date of Receipt Mailing Address PO Box 30660 04 2013 City Zip Code State Transaction ID: AEFAA28B0409D4978B5A Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation Vice President **Auto-Owners Insurance Company** Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Barry Preslaski Date of Receipt Mailing Address PO Box 30660 08 30 2013 City State Zip Code Transaction ID: A196AC0523E854362B2F MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Lee Rademacher Date of Receipt Mailing Address PO Box 30660 80 04 2013 City Zip Code State Transaction ID: A8FD55EE77CD9482DB82 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Assistant Vice President-Commercial Li Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) 90.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE I	NUMBER:	PAGE	: 5	ار
Use separate schedule(s)	(check only	one)			_
for each category of the Detailed Summary Page	X 11a	11b	11c		
	12	14	15		١.

OF 99 12 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Lee Rademacher Date of Receipt Mailing Address PO Box 30660 30 2013 City Zip Code State Transaction ID: A4BA149E79B66434C8BF Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President-Commercial Li Receipt For: Aggregate Year-to-Date ▼ Primary General 270.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Jacqueline Rakers IOM, PFMM Date of Receipt Mailing Address PO Box 116 08 19 2013 City State Zip Code Transaction ID: AF9CC813320A5481ABB2 IL Ohlman 62076-0116 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Illinois Association of Mutual Insuran **Executive Director** Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Theodore Reinbold Date of Receipt Mailing Address PO Box 30660 80 09 2013 City Zip Code State Transaction ID: A8C492EADF0684CA8B49 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** AVP, Commercial Lines Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify)

680.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	F	DR	LINE	NU	MBER	:	PAGE	= {	57	OF	99
Use separate schedule(s) for each category of the	(c	he	ck only	or	ne)						
Detailed Summary Page		X	11a		11b		11c		12		
., .,			13		14		15		16	,	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

National Association of Mutual Insurance Companies PAC

Mr. Jonathan R. Riekse		Date of Receipt
Mailing Address PO Box 30660		08 04 2013 .
City	State Zip Code	Transaction ID : A0A05C88A4E7446A78E
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Senior Vice President, Personal Lines	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	640.00	
Full Name (Last, First, Middle Initial) Mr. Jonathan R. Riekse		Date of Receipt
Mailing Address PO Box 30660		08 30 _2013 _
City	State Zip Code	08 30 2013 Transaction ID : AD3203AEAB8DF465E9I
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	87.00
Name of Employer	Occupation	-
Auto-Owners Insurance Company	Senior Vice President, Personal Lines	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	727.00	
Full Name (Last, First, Middle Initial) . Mr. L. Gerald Roach CPCU,	FLMI	Date of Receipt
Mailing Address PO Box 6927		08 04 2013
City	State Zip Code	Transaction ID : AEC810B7D244C4F15A2
Richmond	VA 23230-0927	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Mutual Assurance Society of Virginia	President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
	, , ,	417.00

FOR LINE NUMBER: PAGE 58 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Mary Jo Robison Date of Receipt Mailing Address PO Box 70 2013 City Zip Code State Transaction ID: A0B45BA5D233241C18D9 Henry IL 61537-0070 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation La Prairie Mutual Insurance Company Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Spencer M. Roman ACAS, MAAA Date of Receipt Mailing Address 355 Maple Ave 08 26 2013 City State Zip Code Transaction ID: A393D8C50B0EE4DBF85B PA Harleysville 19438-2222 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harleysville Mutual Insurance Company Executive Vice President, Field Opera Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Ms. Mary Rowlinson Date of Receipt Mailing Address PO Box 111 20 80 2013 City Zip Code State Transaction ID: A5B9C1025EBC24000A80 OH **Bucyrus** 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 С federal political committee. Name of Employer Occupation United Ohio Insurance Company Claims Operations Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 425.00 Other (specify) 625.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 59 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Mary Rowlinson Date of Receipt Mailing Address PO Box 111 2013 City Zip Code State Transaction ID: ABCA76265594348EC932 OH Bucyrus 44820-0111 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation United Ohio Insurance Company Claims Operations Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Rodney J. Rupp Date of Receipt Mailing Address 6101 Anacapri Blvd 80 09 2013 City State Zip Code Transaction ID: ADE50C8D8237847BBA2D MI Lansing 48917-3994 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Executive Vice President, Claims Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kenneth Schroeder Date of Receipt Mailing Address PO Box 30660 80 04 2013 City Zip Code State Transaction ID: A7CDF61517AB3465EA46 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation Senior Vice President, Commercial Unde Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) 1065.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 60 OF (check only one) X 11a 11b 12 11c

99 Use separate schedule(s) for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Kenneth Schroeder Date of Receipt Mailing Address PO Box 30660 30 2013 City Zip Code State Transaction ID: A118C607638244CEA916 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 45.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President, Commercial Unde Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James C. Schumacher Date of Receipt Mailing Address PO Box 30660 80 04 2013 City State Zip Code Transaction ID: A002D02EEB4D74118834 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Director - Agency Systems Receipt For: Aggregate Year-to-Date ▼ Primary General 320.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. James C. Schumacher Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: A131128E9EDBB4583A2D MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 42.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Director - Agency Systems Receipt For: Aggregate Year-to-Date ▼ Primary General 362.00 Other (specify) 127.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

- 9

	FOF	R LINE	NU	IMBER	:	PAGE	6	61 (OF	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
,		13		14		15		16		\prod_{1}

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Judy Schumacher Date of Receipt Mailing Address 3030 N 3rd St 2013 City Zip Code State Transaction ID: A870E5DA13D6D48CBB7D Phoenix ΑZ 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.45 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Assistant Vice President, Administrati Receipt For: Aggregate Year-to-Date ▼ Primary General 333.20 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Stephen Scott Date of Receipt Mailing Address 200 N Main St 08 26 2013 City State Zip Code Transaction ID: A0654A75EC921439CAD5 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Kent B. Shantz Date of Receipt Mailing Address PO Box 5626 09 80 2013 City State Zip Code Transaction ID: ADB444B76DEB6468881A IL Rockford 61125-0626 Amount of Each Receipt this Period FEC ID number of contributing C 78.00 federal political committee.

SUBTOTAL of Receipts This Page (optional)		Ī	7	_		5	19	8.4	5	
TOTAL This Period (last page this line number only)		I	7	I		,		_	Ι	

663.00

Occupation

Vice President of Operations

Aggregate Year-to-Date ▼

Name of Employer

Primary

Other (specify)

Receipt For:

Rockford Mutual Insurance Company

General

	FOR LINE N	NUMBER:	PAGE	E 62 O	F 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ugo	13	□ 14	15	16	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Kent B. Shantz Date of Receipt Mailing Address PO Box 5626 2013 City State Zip Code Transaction ID: AACCCF5DC649B452390D 61125-0626 Rockford IL Amount of Each Receipt this Period FEC ID number of contributing 78.00 federal political committee. Name of Employer Occupation Rockford Mutual Insurance Company Vice President of Operations Receipt For: Aggregate Year-to-Date ▼ Primary General 741.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. William D. Sheldon Date of Receipt Mailing Address 3030 N 3rd St 80 23 2013 City State Zip Code Transaction ID: A941D5489CB8540FCA11 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company General Counsel and Chief Compliance O Receipt For:

Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 333.28	
Full Name (Last, First, Middle Initial) C. Mr. Gregory Shell Mailing Address PO Box 30660		Date of Receipt 08 04 2013
City	State Zip Code	Transaction ID : AC850ED345D48471292A
Lansing	MI 48909-8160	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Regional Vice President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	336.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

140.83

FOR LINE NUMBER: PAGE 63 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Gregory Shell Date of Receipt Mailing Address PO Box 30660 30 2013 City Zip Code State Transaction ID: A2967C076235246FF8C0 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 386.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Steven C. Sliver CPA Date of Receipt Mailing Address PO Box 577 08 30 2013 City State Zip Code Transaction ID: A4FBC7D5F6D784C60B00 PA Huntingdon 16652-0577 Amount of Each Receipt this Period FEC ID number of contributing 625.00 federal political committee. Name of Employer Occupation Mutual Benefit Insurance Company CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1875.00 Other (specify) Full Name (Last, First, Middle Initial) C. Mr. Donald A. Smith Jr. Date of Receipt Mailing Address 3030 N 3rd St 80 23 2013 City State Zip Code Transaction ID: A8A0F11292C2C4010B9B ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 105.00 federal political committee. Name of Employer Occupation President & CEO CopperPoint Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 1680.00 Other (specify) 780.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 64 OF Use separate schedule(s) (check only one) X 11a 11b 12 11c

99

for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Abigail Smith Date of Receipt Mailing Address 200 N Main St 2013 26 City Zip Code State Transaction ID: A52D70FEE15384C229A5 MD Bel Air 21014-3544 Amount of Each Receipt this Period FEC ID number of contributing 100.00 federal political committee. Name of Employer Occupation Harford Mutual Insurance Company Director Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John K. Smith CRM, CIC Date of Receipt Mailing Address 1 Commerce Sq 08 04 2013 City State Zip Code Transaction ID: A44970A6E280249E584D Philadelphia PA 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1515.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. John K. Smith CRM, CIC, Date of Receipt Mailing Address 1 Commerce Sq 09 80 2013 City State Zip Code Transaction ID: A6257532295514EBB9D2 PΑ Philadelphia 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 С federal political committee. Name of Employer Occupation President & CEO Pennsylvania Lumbermens Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 1590.00 Other (specify) 250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 65 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12

Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. John K. Smith CRM, CIC, Date of Receipt Mailing Address 1 Commerce Sq 2013 16 City Zip Code State Transaction ID: AB14D8C5631244561BEE PΑ Philadelphia 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation President & CEO Pennsylvania Lumbermens Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 1665.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. John K. Smith CRM, CIC Date of Receipt Mailing Address 1 Commerce Sq 08 22 2013 City State Zip Code Transaction ID: A32226200F1174CEEB67 Philadelphia PA 19103-7042 Amount of Each Receipt this Period FEC ID number of contributing 75.00 federal political committee. Name of Employer Occupation Pennsylvania Lumbermens Mutual Insuran President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1740.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Irica Solomon Date of Receipt Mailing Address 122 C St NW Ste 540 80 16 2013 City Zip Code State Transaction ID: AC18ABF9A36E548C6A05 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 45.46 С federal political committee. Name of Employer Occupation Vice President of Federal and Politica National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 588.96 Other (specify) 195.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 66 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Irica Solomon Date of Receipt Mailing Address 122 C St NW Ste 540 2013 City Zip Code State Transaction ID: A61529EBF29B34CED8B3 DC Washington 20001-2102 Amount of Each Receipt this Period FEC ID number of contributing 45.46 federal political committee. Name of Employer Occupation Vice President of Federal and Politica National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 634.42 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Steven C. Speicher Date of Receipt Mailing Address PO Box 30660 08 04 2013 City State Zip Code Transaction ID: AB49DF279161D463A9AB MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 30.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President - Forest Regio Receipt For: Aggregate Year-to-Date ▼ Primary General 240.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Steven C. Speicher Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: AAF93D0E92E584DAFA73 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Regional Vice President - Forest Regio Receipt For: Aggregate Year-to-Date ▼ Primary General 290.00 Other (specify) 125.46 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: (check only one) PAGE 67 OF 99 Use separate schedule(s)

TEMIZED RECEIPTS	for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and Stator for commercial purposes, other than using the n		
NAME OF COMMITTEE (In Full) National Association of Mutual In:	surance Companies PAC	
Harford Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MD 21014-3544 C Occupation Executive Vice President & General Cou Aggregate Year-to-Date ▼ 444.48	Date of Receipt 08 09 2013 Transaction ID: A48AE0A89B3184DF3B4B Amount of Each Receipt this Period 111.12
Harford Mutual Insurance Company	State Zip Code MD 21014-3544 C Occupation Executive Vice President & General Cou Aggregate Year-to-Date ▼ 555.60	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
National Association of Mutual Insuran	State Zip Code IN 46268-0700 C Occupation Vice President - Member Development Aggregate Year-to-Date ▼ 340.00	Date of Receipt 08 16 2013 Transaction ID : A1A489195353947AB8B8 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number on		242.24

	FOR LINE I	NUMBER:	PAGE	E 68 OI	F 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
zotanou cummuny r ugo	13	14	15	16	\square_1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Kristen Spriggs Date of Receipt Mailing Address PO Box 68700 2013 City State Zip Code Transaction ID: A7691DEB345E04B7584F IN 46268-0700 Indianapolis Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer Occupation Vice President - Member Development National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 360.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. James Stabler Date of Receipt Mailing Address 3030 N 3rd St 80 23 2013 City State Zip Code Transaction ID: AAC2E1C0FDF5C4836BC6 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing 20.68 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President, Chief Legal Counsel Receipt For: Aggregate Vear-to-Date

Primary General Other (specify) ▼	333.28	
Full Name (Last, First, Middle Initial) Mr. Daniel Stedman Mailing Address 1 Preferred Way		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City New Berlin	State Zip Code NY 13411-1800	Transaction ID: A472B1DB825284349A37 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Preferred Mutual Insurance Company	Director of Commercial Lines	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		540 68

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

	FOR LINE I	NUMBER:	: PAGI	= 69 OF	- 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	1

	d Statements may not be sold or used by any pers the name and address of any political committee to	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Paul O. Stillman Mailing Address 1 Preferred Way		Date of Receipt M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
City New Berlin FEC ID number of contributing federal political committee. Name of Employer Preferred Mutual Insurance Company Receipt For: Primary General Other (specify)	State Zip Code NY 13411-1896 C Occupation Vice Chairman of the Board Aggregate Year-to-Date ▼ 250.00	Transaction ID : AFA7E2107907C4D0F819 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Mr. Robert G. Street AIM Mailing Address 29 Creighton Ave City Foxboro FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance	State Zip Code MA 02035-1405 C Occupation NE Casualty Claims Division Manager	Date of Receipt 08 07 2013 Transaction ID: A1E38E2334FA14C6DB40 Amount of Each Receipt this Period 20.00
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	
Full Name (Last, First, Middle Initial) Mr. Robert G. Street AIM Mailing Address 29 Creighton Ave City Foxboro FEC ID number of contributing federal political committee. Name of Employer Norfolk & Dedham Mutual Fire Insurance Receipt For: Primary General Other (specify)	State Zip Code MA 02035-1405 C Occupation NE Casualty Claims Division Manager Aggregate Year-to-Date ▼ 340.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional).	>	290.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 70 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 2013 16 City Zip Code State Transaction ID: A520B642617CE43A0902 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 96.15 federal political committee. Name of Employer Occupation President & CEO NAMIC Insurance Company, Inc. Receipt For: Aggregate Year-to-Date ▼ Primary General 1578.40 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Tim F. Sullivan RPLU Date of Receipt Mailing Address PO Box 68700 08 23 2013 City State Zip Code Transaction ID: A822A4256C8324892988 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 96.15 federal political committee. Name of Employer Occupation NAMIC Insurance Company, Inc. President & CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 1674.55 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 80 16 2013 City Zip Code State Transaction ID: A9D8019552921470CB9B IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 52.63 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Vice President - Membership/Insurance Receipt For: Aggregate Year-to-Date ▼ Primary General 473.70 Other (specify) 244.93 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

FOR LINE NUMBER: PAGE 71 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Terry Suttner Date of Receipt Mailing Address PO Box 68700 2013 City Zip Code State Transaction ID: A7110E13CA0C14D7C8B1 Indianapolis IN 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 52.63 federal political committee. Name of Employer Occupation Vice President - Membership/Insurance National Association of Mutual Insuran Receipt For: Aggregate Year-to-Date ▼ Primary General 526.33 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 08 04 2013 City State Zip Code Transaction ID: A8EEB09744FC84D2CACB MI 48909-8160 Lansing Amount of Each Receipt this Period FEC ID number of contributing 85.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** President Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Jeffrey Tagsold Date of Receipt Mailing Address PO Box 30660 30 80 2013 City Zip Code State Transaction ID: A33B41D4691FD48DDA53 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 100.00 С federal political committee. Name of Employer Occupation President Auto-Owners Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 780.00 Other (specify) 237.63 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... 9 - 9

	FOF	R LINE	NU	IMBER	:	PAGE	. 7	72 OI	F	99
Use separate schedule(s)	(che	eck only	or or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee to	
Name of committee (in full) National Association of Mutua	al Insurance Companies PAC	
Full Name (Last, First, Middle Initial) A. Mr. Paul Tetrault		Date of Receipt
Mailing Address PO Box 68700		08 16 2013
City	State Zip Code	Transaction ID : A21B418A200B5490CAD
Indianapolis	IN 46268-0700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
National Association of Mutual Insuran	State Affairs Manager/Northeast Region	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	340.00	
Full Name (Last, First, Middle Initial) 3. Mr. Paul Tetrault	·	Date of Receipt
Mailing Address PO Box 68700		08 23 2013
City	State Zip Code	Transaction ID : AD1BBBDEAE8754B1FA
Indianapolis	IN 46268-0700	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer	Occupation	
National Association of Mutual Insuran	State Affairs Manager/Northeast Region	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
Full Name (Last, First, Middle Initial) C. Mr. Daniel J. Thelen	- '	Date of Receipt
Mailing Address PO Box 30660		08 04 2013
City Lansing	State Zip Code MI 48909-8160	Transaction ID : A3141C11FBB4C40C5Bl Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer	Occupation	
Auto-Owners Insurance Company	Senior Vice President of Human Resourc	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)	90.00
	·	
TOTAL This Period (last page this line num	ber only)	

FOR LINE NUMBER: PAGE 73 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Daniel J. Thelen Date of Receipt Mailing Address PO Box 30660 30 2013 City Zip Code State Transaction ID: A4084BB1BBC3A4FAF870 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Senior Vice President of Human Resourc Receipt For: Aggregate Year-to-Date ▼ Primary General 450.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 80 16 2013 City State Zip Code Transaction ID: AE89A3461FEBB41FA841 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 federal political committee. Name of Employer Occupation National Association of Mutual Insuran Assistant Vice President - State Affai Receipt For: Aggregate Year-to-Date ▼ Primary General 680.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Joe Thesing Date of Receipt Mailing Address PO Box 68700 80 23 2013 City Zip Code State Transaction ID: A1ADE53B02B3949B18B6 IN Indianapolis 46268-0700 Amount of Each Receipt this Period FEC ID number of contributing 40.00 С federal political committee. Name of Employer Occupation National Association of Mutual Insuran Assistant Vice President - State Affai Receipt For: Aggregate Year-to-Date ▼ Primary General 720.00 Other (specify) 130.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR	LINE	NU	MBER	:	PAGE	: 7	74 O	F
Use separate schedule(s)	(chec	k only	or	ne)					
for each category of the Detailed Summary Page		11a		11b		11c		12	
Detailed Summary rage		13		14		15		16	Г

Any information copied from such Reports and a or for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutual	Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Bruce D. Thomas PFMM Mailing Address PO Box 594		Date of Receipt
City	State Zip Code	08 20 2013 Transaction ID : A6B61CA5122F94D64A55
Algona	IA 50511-0594	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	
Heartland Mutual Insurance Association	President	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 875.00	
Full Name (Last, First, Middle Initial) Mr. Gary W. Thompson CPCU, CIC		Date of Receipt
Mailing Address PO Box 618		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	08 09 2013 Transaction ID : ABEE7E86E839D4FD28A2
Columbia	MO 65205-0618	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer Columbia Mutual Insurance Company	Occupation President/CEO	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) C. Mr. Gary W. Thompson CPCU, C	CIC	Date of Receipt
Mailing Address PO Box 618		08 22 2013
City Columbia	State Zip Code MO 65205-0618	Transaction ID : AFAD095C33BA843A293A
	00200-0010	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	100.00
Name of Employer	Occupation	1
Columbia Mutual Insurance Company	President/CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		300.00
TOTAL This Period (last page this line number	only)	

FOR LINE NUMBER: PAGE 75 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 02 2013 City Zip Code State Transaction ID: A799639F8B67341F4906 Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Vice President of Administration Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 624.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 08 16 2013 City State Zip Code Transaction ID: AC1BFD013D8D449D687D Frankenmuth MI 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 39.00 federal political committee. Name of Employer Occupation Frankenmuth Mutual Insurance Company Vice President of Administration Receipt For: Aggregate Year-to-Date ▼ Primary General 663.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Randall Trinklein Date of Receipt Mailing Address One Mutual Avenue 30 80 2013 City Zip Code State Transaction ID: A5C9C435B3F0E40D4883 MI Frankenmuth 48787-0001 Amount of Each Receipt this Period FEC ID number of contributing 39.00 С federal political committee. Name of Employer Occupation Vice President of Administration Frankenmuth Mutual Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 702.00 Other (specify) 117.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOR LINE N	NUMBER:	PAGE	E 76 O	F 9
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
Dotailou Guilliai y 1 ago	13	14	15	16	\square

۹.	Full Name (Last, First, Middle Initial) Mrs. Ellen S. Truant		Date of Receipt
	Mailing Address 200 N Main St		08 09 2013 .
	City	State Zip Code	Transaction ID : A73CE392ABF3447159E
	Bel Air	MD 21014-3544	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	55.56
	Name of Employer	Occupation	
	Harford Mutual Insurance Company	Vice President-Human Resources	
	Receipt For:	Aggregate Year-to-Date ▼	1
	Primary General Other (specify) ▼	309.54	
3.	Full Name (Last, First, Middle Initial) Mrs. Ellen S. Truant		Date of Receipt
	Mailing Address 200 N Main St	08 30 _2013 _	
	City	State Zip Code	Transaction ID : AE267DD0167C74F3AA
	Bel Air	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C	55.56
	Name of Employer Harford Mutual Insurance Company	Occupation Vice President-Human Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.10	
_	Full Name (Last, First, Middle Initial) Mr. Gregg R. U'Ren		Date of Receipt
, .	Mailing Address PO Box 30660		M = M / D = D / Y = Y = Y
	City	State Zip Code	08 30 2013 Transaction ID : A21EAD7AE9DCA4C51
	Lansing	MI 48909-8160	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer		
	Auto-Owners Insurance Company		
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	225.00	

	FOR L	LINE I	NU	MBER:	PAGE	. 7	77	OF	
Use separate schedule(s) for each category of the	(check	only	on	ie)					
Detailed Summary Page	X 1	1a		11b	11c		12		
	l □₁	2		1/	15		16	[

99

Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any personal he name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Robert A. Wadsworth CIC, CPC Mailing Address 1 Preferred Way	U	Date of Receipt
City New Berlin FEC ID number of contributing federal political committee. Name of Employer Preferred Mutual Insurance Company Receipt For:	State Zip Code NY 13411-1896 C Occupation Chairman	Transaction ID : ADE5BE92AF7664942B21 Amount of Each Receipt this Period 1000.00
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) 3. Mr. Jerry Wallace Mailing Address PO Box 30660		Date of Receipt
City Lansing FEC ID number of contributing federal political committee.	State Zip Code MI 48909-8160	08 09 2013 Transaction ID : A80997632483E4C9D8CD Amount of Each Receipt this Period 250.00
Name of Employer Auto-Owners Insurance Company Receipt For: □ Primary □ General Other (specify) ▼	Occupation Assistant Manager Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James J. Walsh Jr. Mailing Address PO Box 30660		Date of Receipt 08 04 2013
City Lansing FEC ID number of contributing federal political committee.	State Zip Code MI 48909-8160	Transaction ID : A62BAC8B0530B4ED4AA Amount of Each Receipt this Period 50.00
Name of Employer Auto-Owners Insurance Company Receipt For: □ Primary □ General Other (specify) ▼	Occupation Vice President-Claims Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optional)	<u> </u>	1300.00
TOTAL This Period (last page this line number		

	FOF	LINE	NU	MBER	:	PAGE	78 OF	=	99
Use separate schedule(s)	(che	ck only	or	ne)					
for each category of the Detailed Summary Page	X	11a		11b		11c	12		
zotanou oummary r ago		13		14		15	16		17

Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any pers the name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) National Association of Mutua	Il Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. James J. Walsh Jr. Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Vice President-Claims Aggregate Year-to-Date ▼ 450.00	Date of Receipt 08 30 2013 Transaction ID: AE55814E2DDD143EDB40 Amount of Each Receipt this Period 50.00
Full Name (Last, First, Middle Initial) Mr. Ian R. Ward Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Senior Vice President, Investments and Aggregate Year-to-Date ▼ 360.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Ian R. Ward Mailing Address PO Box 30660 City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48909-8160 C Occupation Senior Vice President, Investments and Aggregate Year-to-Date ▼ 410.00	Date of Receipt Mark
SUBTOTAL of Receipts This Page (optional)	•	145.00
TOTAL This Period (last page this line numb	er only)	

FOR LINE NUMBER: PAGE 79 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Mark Wenger Date of Receipt Mailing Address PO Box 30660 04 2013 City Zip Code State Transaction ID: ADAE70A7156D34687945 Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President and Chief P&C Receipt For: Aggregate Year-to-Date ▼ Primary General 672.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Mark Wenger Date of Receipt Mailing Address PO Box 30660 08 30 2013 City State Zip Code Transaction ID: AD5D8D29A40E64481BA8 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 84.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Assistant Vice President and Chief P&C Receipt For: Aggregate Year-to-Date ▼ Primary General 756.00 Other (specify) Full Name (Last, First, Middle Initial) c. Jamie Whisnant Date of Receipt Mailing Address PO Box 30660 80 20 2013 City Zip Code State Transaction ID: A46F04CB253A345DCBF7 MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 350.00 С federal political committee. Name of Employer Occupation Auto-Owners Insurance Company Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 350.00 Other (specify) 518.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 80 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Robert A. White CIC, ARM, Date of Receipt Mailing Address 1 S Wacker Dr Ste 2380 2013 City State Zip Code Transaction ID: A3C120E1DB15944BFA05 Chicago IL 60606-4617 Amount of Each Receipt this Period FEC ID number of contributing 50.00 federal political committee. Name of Employer Occupation President & CEO First Nonprofit Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Scott S. Wilder Date of Receipt Mailing Address PO Box 30660 80 12 2013 City State Zip Code Transaction ID: A3F302EE899D9414F8AA MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Regional Vice President Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Noel A. Williams Date of Receipt Mailing Address 3030 N 3rd St 80 23 2013 City State Zip Code Transaction ID: A3C3E80AAB0C14F858B7 ΑZ Phoenix 85012-3074 Amount of Each Receipt this Period FEC ID number of contributing C 20.83 federal political committee. Name of Employer Occupation CopperPoint Mutual Insurance Company Vice President of Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 533.28 Other (specify) 370.83 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

FOR LINE NUMBER: PAGE 81 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Ms. Denise G. Williams Date of Receipt Mailing Address PO Box 30660 04 2013 City Zip Code State Transaction ID: AF2EC0480F067406D93D Lansing MI 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 33.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager-East Michigan Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 264.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ms. Denise G. Williams Date of Receipt Mailing Address PO Box 30660 08 30 2013 City State Zip Code Transaction ID: A691C6435327E458E90D MI Lansing 48909-8160 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Auto-Owners Insurance Company** Manager-East Michigan Underwriting Receipt For: Aggregate Year-to-Date ▼ Primary General 764.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. David F. Wilson Date of Receipt Mailing Address PO Box 1070 80 30 2013 City Zip Code State Transaction ID: A40F038C20899451280F Galax VA 24333-1070 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Grayson Carroll Wythe Mutual Insurance Claims Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 783.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only)..... - 9

	FOF	R LINE	NU	IMBER	:	PAGE	. 8	32 OI	F	99
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		17

	Statements may not be sold or used by any pershe name and address of any political committee t	
NAME OF COMMITTEE (In Full) National Association of Mutua	I Insurance Companies PAC	
Full Name (Last, First, Middle Initial) Mr. Daniel Witt Mailing Address 3030 N 3rd St		Date of Receipt 08 23 2013
City Phoenix FEC ID number of contributing federal political committee. Name of Employer CopperPoint Mutual Insurance Company Receipt For: Primary General Other (specify) ▼	State Zip Code AZ 85012-3074 C Occupation Claims Manager Aggregate Year-to-Date ▼ 240.00	Transaction ID : AC4A3E65C65B74DA7809 Amount of Each Receipt this Period 15.00
Full Name (Last, First, Middle Initial) Mr. William Woodbury Mailing Address 6101 Anacapri Blvd City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48917-3968 C Occupation SVP, Assoc. Secretary & Assoc. General Aggregate Year-to-Date ▼ 672.00	Date of Receipt 08 04 2013 Transaction ID: AC9D30F2A6321423D92A Amount of Each Receipt this Period 84.00
Full Name (Last, First, Middle Initial) Mr. William Woodbury Mailing Address 6101 Anacapri Blvd City Lansing FEC ID number of contributing federal political committee. Name of Employer Auto-Owners Insurance Company Receipt For: Primary General Other (specify)	State Zip Code MI 48917-3968 C Occupation SVP, Assoc. Secretary & Assoc. General Aggregate Year-to-Date ▼ 756.00	Date of Receipt 08 30 2013 Transaction ID: A57168D409C064588912 Amount of Each Receipt this Period 84.00
SUBTOTAL of Receipts This Page (optional).	>	183.00
TOTAL This Period (last page this line number	er only)	

FOR LINE NUMBER: PAGE 83 OF 99 Use separate schedule(s) (check only one) for each category of the X 11a 11b 11c 12 Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) National Association of Mutual Insurance Companies PAC Full Name (Last, First, Middle Initial) Mr. Jeffrey S. Wrobel SR, CPC, A Date of Receipt Mailing Address PO Box 6927 04 2013 City Zip Code State Transaction ID: AB0834FAE2EE6493EA0C Richmond VA 23230-0927 Amount of Each Receipt this Period FEC ID number of contributing C 42.00 federal political committee. Name of Employer Occupation EVP, IT & Underwriting Mutual Assurance Society of Virginia Receipt For: Aggregate Year-to-Date ▼ Primary General 548.00 Other (specify) Full Name (Last, First, Middle Initial) B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 42.00 SUBTOTAL of Receipts This Page (optional)..... 29641.24 TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 OF 99 (check only one) 11a 11b X 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the			
Name of committee (In Full) National Association of Mutual	Insurance	e Companies PAC	
Full Name (Last, First, Middle Initial) Cuna Mutual Holding Company Political Mailing Address 5910 Mineral Point Rd, PO Bo Mail Stop 5910 4 A2 City Madison FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify)	State WI C CO Occupation	Zip Code 53701 0402107	Date of Receipt 08 23 2013 Transaction ID: A11EFD15DF5A448EBACF Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) Grange Mutual Casualty Company Mailing Address 671 South High Street PO Box1218 City Columbus FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State OH C COO	Zip Code 43216 0302695 1 Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Secura Insurance a Mutual Comp Mailing Address 2401 S. Memorial Drive City Appleton FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary Other (specify)	State WI C CO	Zip Code 54915 0343384	Date of Receipt 08 20 2013 Transaction ID: AF60D6784E0E4496E89D Amount of Each Receipt this Period 5000.00
SUBTOTAL of Receipts This Page (optional)			8500.00

TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 OF 99 (check only one) 11a 11b X 11c 12 13 14 15 16 17
	ny information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) National Association of Mutual In	nsurance	e Companies PAC	
Α.	Full Name (Last, First, Middle Initial) State Auto Employees Fed PAC Committee of	State Autom	obile Mutual Insurance Company	Date of Receipt
	Mailing Address 518 East Broad Street			08 202013
	City	State OH	Zip Code 43215	Transaction ID : A404B92A3BD434B7AABB
	Columbus	ОП	43215	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0430884	2500.00
	Name of Employer	Occupation		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		2500.00	
_	Full Name (Last, First, Middle Initial)			
В.				Date of Receipt
	Mailing Address			M = M / D = D / Y = Y = Y
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		Amount of Each fleeeight this Feriod
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼	
_	Full Name (Last, First, Middle Initial)			
C.	Mailing Address			Date of Receipt
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		Amount of Lacif Receipt this Period
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify)		Year-to-Date ▼	
5	SUBTOTAL of Receipts This Page (optional)			2500.00

TOTAL This Period (last page this line number only).....

11000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 OF 99 (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) National Association of Mutual	ne name and a	address of any political committee	
Full Name (Last, First, Middle Initial) NAMIC Administrative Fund Mailing Address 3601 Vincennes Rd City Indianapolis FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State IN C	Zip Code 46268-1154	Date of Receipt 08 30 2013 Transaction ID: A9F4A4F57FE94A70BD2 Amount of Each Receipt this Period 298.36 Reimb. of bank fees
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify) Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M = M / D = D / Y = Y = Y = Y Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) C. Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)			298.36

TOTAL This Period (last page this line number only).....

298.36

ľ

SCHEDULE B (FEC Form 3X)	Llea congrete cohodula/	FOR LINE		OF 99	
ITEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the Detailed Summary Page	(check only	/ one) 22 23 24 25	26	
	Dotailed Cultillary 1 age	27	28a 28b 28c 29	30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full)					
National Association of Mutual Insu	rance Companies	PAC			
Full Name (Last, First, Middle Initial)					
A. American Express			Date of Disbursement		
Mailing Address PO Box 981540			08 05 2013		
,	State Zip Code TX 79998-1540		Transaction ID: B68F2D13D6E85	4588BBB	
El Paso Purpose of Disbursement	TX 79998-1540	Ι			
Credit Card Processing Fees			Amount of Each Disbursement this	Period	
Candidate Name		Category/		. 05	
		Type		3.25	
Office Sought: House Disbursem					
	Primary General Other (specify)				
State: District:	Other (specify)				
Full Name (Last, First, Middle Initial)					
B. American Express			Date of Disbursement		
			M M / D D / Y Y Y	Υ	
Mailing Address PO Box 981540			08 12 2013		
El Paso	State Zip Code TX 79998-1540		Transaction ID : BAF46AED784A6	649EAA3	
Purpose of Disbursement Credit Card Processing Fees			Amount of Each Disbursement this	Period	
Candidate Name		Category/ Type		3.13	
Office Sought: House Disbursem	nent For:				
	Primary General				
President State: District:	Other (specify) ▼				
Full Name (Last, First, Middle Initial)					
C. American Express			Date of Disbursement		
Mailing Address PO Box 981540			08 26 2013	Y	
	State Zip Code		Transaction ID : B2667AEACF717	′4430B1C	
El Paso Purpose of Disbursement	TX 79998-1540				
Credit Card Processing Fees			Amount of Each Disbursement this	Pariod	
Candidate Name		Category/ Type		3.13	
Office Sought: House Disbursem	nent For:	1 762			
Senate	Primary General				
	Other (specify) ▼				
State: District:					
SUBTOTAL of Disbursements This Page (optional)		·····	19).51	
TOTAL This Period (last page this line number only).					

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 88 OF 99
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	(check only one)	
 	Detailed Summary Page	X 21b	22 23	24 25 26
	, ,	27	28a 28b	28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	ic and address of any point	car committee te	3011011 CONTINUATIONS II	om sach committee.
National Association of Mutual Insu	rance Companies	DΔC		
National Association of Mutual Inst	mance Companies	1 70		
Full Name (Last, First, Middle Initial)			Date of Disbursem	
A. Aristotle	Aristotle			
Moiling Address 205 Describes in Aug CF			08 26	2013
Mailing Address 205 Pennsylvania Ave SE			08 26	2013
City	State Zip Code		Tarana dia a ID	DD 400050774 4 D 4050D0
Washington	DC 20003-1164		i ransaction iD : i	BDA000E077AAB46E3B8
Purpose of Disbursement Credit Card Processing Fees			Amount of Fools Di	Colores and the Device I
Candidate Name			Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		125.00
Office Sought: House Disburser	nent For:	Турс		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			Date of Disburseme	
B. Chase Bank	Chase Bank			
Mailing Address 8751 Michigan Rd			08 02	2013
o o o monigan na				
,	State Zip Code		Transaction ID :	B5593C6123AB245AE940
Indianapolis Purpose of Disbursement	IN 46268-3141			
Credit Card Processing Fees			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
		Type		134.09
Office Sought: House Disburser				
Senate	Primary General			
President State: District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C.			Date of Disburseme	ent
			M M / D D	/
Mailing Address				
0.1	7'- 0			
City	State Zip Code			
Purpose of Disbursement				
			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
000		Type	7	7
Office Sought: House Disburser Senate	nent For: Primary General			
President	Other (specify)			
State: District:	- · · · · (- - > o · · ·) / •			
SUBTOTAL of Disbursements This Page (optional)				259.09
				070.00
TOTAL This Period (last page this line number only)				278.60

ľ

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 89 OF 99
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Deports and Chat-	monte may not be sald as			
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
National Association of Mutual Ins	urance Companies F	PAC		
Full Name (Last, First, Middle Initial)				
A. ANN WAGNER FOR CONGRESS	5		Date of Disbursemer	
Mailing Address PO BOX 50	0			2013
City	State Zip Code		Transaction ID - DI	F2F2C0C00C A 7.474 FD7D
BALLWIN	MO 63022		Transaction ID : Bi	E35360C99CA7471FB7B
Purpose of Disbursement Political Contribution			Amount of Each Disl	oursement this Period
Candidate Name		Category/		2000.00
Ann L Wagner Office Sought: House Disburse	ment For: 2014	Туре		7
Senate Sought.	Primary General			
President	Other (specify) ▼			
State: MO District: 02				
Full Name (Last, First, Middle Initial)	0.11.0		Date of Dist	-1
B. AUSTIN SCOTT FOR CONGRES	SINC		Date of Disbursemer	
Mailing Address PO BOX 2530			08 12	2013
City TIFTON	State Zip Code GA 31793		Transaction ID : B.	A033E81891104591BBA
Purpose of Disbursement Political Contribution			Amount of Each Disl	oursement this Period
Candidate Name		Category/		
Rep. Austin Scott		Type		2500.00
	ment For: 2014			
Senate President	Primary General			
State: GA District: 08	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. Blue Dog Political Action Committee	ee		Date of Disbursemen	nt
			M M / D D	/ Y T Y T Y
Mailing Address 6849 Old Dominion Drive Suite 222			08 12	2013
City	State Zip Code		Transaction ID : B	3EF6367E3C164596A7C
McLean Purpose of Disbursement	VA 22101			
Political Contribution			Amount of Each Diel	oursement this Period
Candidate Name		Category/ Type	Amount of Lacif Disi	5000.00
Office Sought: House Disburse	ment For: 2013	1,400		7
Senate	Primary General			
President	Other (specify) ▼			
State: District:	Other2013			
SUBTOTAL of Disbursements This Page (optional).		·····		9500.00
TOTAL This Period (last page this line number only)	·····		

SCHEDULE B (FEC Form 3)		FOR LINE	NUMBER: PAGE 90 OF 99
ITEMIZED DISBURSEMENTS	Use separate schedule(s	(check only	v one)
	Detailed Summary Page	. 210	22 🗙 23 24 25 26
		27	28a 28b 28c 29 30b
Any information copied from such Reports a			
or for commercial purposes, other than using	g the name and address of any poli	tical committee to	Solicit contributions from such committee.
NAME OF COMMITTEE (In Full)	al Inguiron og Companion	DAC	
National Association of Mutu	iai insurance Companies	PAC	
Full Name (Last, First, Middle Initial)			
A. CAMP PAC			Date of Disbursement
Mailing Address 5915 Eastman Avenue			08 12 2013
Suite 100			00 12 2013
City	State Zip Code		Transaction ID : B2061A3C4EE30463EB70
Midland	MI 48640-6824		Transaction ID: B2061A3C4EE30463EB70
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this Period
Candidate Name			Amount of Each dispulsement this Penou
		Category/ Type	2500.00
Office Sought: House	Disbursement For: 2013	71	,
Senate	Primary General		
President	Other (specify) ▼		
State: District:	Other2013	3	
Full Name (Last, First, Middle Initial) B. COTTON FOR CONGRESS			Date of Disbursement
B. COTTON FOR CONGRESS			
Mailing Address PO BOX 379			08 12 2013
City	State Zip Code		Transaction ID : B2F51DE1907A14293AE4
Dardanelle Purpose of Disbursement	AR 72834-0379		
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	
Thomas Cotton		Type	1000.00
Office Sought:	Disbursement For: 2014		
Senate	Primary General		
State: AR District: 04	Other (specify) ▼		
Full Name (Last, First, Middle Initial)			
C. David Scott for Congress			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address PO Box 960821			08 12 2013
C:A.	Ctata Zin Cada		
City Riverdale	State Zip Code GA 30296		Transaction ID : BCA2DF48604D4448AA30
Purpose of Disbursement			
Political Contribution			Amount of Each Disbursement this Period
Candidate Name		Category/	1000.00
Rep. David A. Scott Office Sought: House	Disbursement For: 2014	Туре	1000.00
Senate	Primary General		
President	Other (specify)		
State: GA District: 13			
SUBTOTAL of Disbursements This Page (d	ptional)		4500.00
TOTAL This Period (last page this line num	nber only)		

ľ

SCHEDULE B (FEC Form 3X)	Lice congrete cohedule(s)	FOR LINE		PAGE 91 OF 99
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full) National Association of Mutual Ins	urance Companies F	PAC		
Full Name (Last, First, Middle Initial)			Date of Disbursemer	
A. Fitzpatrick for Congress	Fitzpatrick for Congress			
Mailing Address 115 N Broad Street			08 12	2013
City	State Zip Code		Transaction ID · BI	D126DCF5CC6747FAAEI
Doylestown Purpose of Disbursement	PA 18901		Transaction ib . Bi	7120D01 30001 411 AALI
Political Contribution			Amount of Each Disk	oursement this Period
Candidate Name		Category/		2502.00
Rep. Mike G. Fitzpatrick		Type		2500.00
Office Sought: House Disburse	ement For: 2014 Primary General Other (specify)			
State: PA District: 08	-			
Full Name (Last, First, Middle Initial) B. FRIENDS OF JOHN DELANEY				nt
Mailing Address PO BOX 60320			08 12	2013
City POTOMAC	State Zip Code MD 20859		Transaction ID : B	5791B79F66924ED196B
Purpose of Disbursement Political Contribution		· · ·	Amount of Each Disk	oursement this Period
Candidate Name		Category/		1000.00
John K Delaney Office Sought: House Disburse	ment Ferri 2014	Туре	-	1.000.00
	ement For: 2014 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. FRIENDS OF SUSAN BROOKS				nt
Mailing Address 9333 N MERIDIAN STREET SUITE 230			08 / 12	2013
City INDIANAPOLIS	State Zip Code IN 46260		Transaction ID : BI	B12233B66F0447D0BF6
Purpose of Disbursement Political Contribution		· · ·	Amount of Each Disk	oursement this Period
Candidate Name		Category/	Amount of Lacif Dist	Juisement this Fellou
Rep. Susan W. Brooks		Type		1000.00
Senate President	ement For: 2014 Primary General Other (specify)		,	,
State: IN District: 05				
SUBTOTAL of Disbursements This Page (optional).		······•	7	4500.00
TOTAL This Period (last page this line number only	/)			7

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 92 OF 99
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlook orliy		7 —
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,			
National Association of Mutual Insu	rance Companies I	PAC		
	iranoo oompanioo i	7.0		
Full Name (Last, First, Middle Initial)			5	
A. JIM PAC			Date of Disburseme	
Mailing Address PO BOX 15320			08 12	2013
Maining Addition 1 or BOX 10020			12	2010
City	State Zip Code		Transaction ID . F	323BB4121FC1847EF87D
Washington	DC 20003-0320		Transaction iD . E)23BB4121FC1047EF07D
Purpose of Disbursement Political Contribution			Amount of Each Die	sbursement this Period
Candidate Name			Amount of Lacif Dis	spursement this Fellou
		Category/ Type		2500.00
Office Sought: House Disbursen	nent For: 2013	71	,	,
Senate	Primary General			
	Other (specify) ▼			
State: District:	Other2013			
Full Name (Last, First, Middle Initial) B. Montanans for Tester			Date of Disburseme	ont
B. Montanans for Tester			Man / Dan	/
Mailing Address PO Box 3171			08 12	2013
•	State Zip Code		Transaction ID : E	B417586C94DFB4C31A0F
Billings Purpose of Disbursement	MT 59103			
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		
Sen. Jon Tester		Type	7	2500.00
	nent For: 2018			
	Primary General			
State: MT District:	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
C. MOORE FOR CONGRESS			Date of Disburseme	ent
			M M / D D	/ Y Y Y Y Y
Mailing Address PO BOX 16646			08 12	2013
City	State Zip Code			
City S MILWAUKEE	WI 53216		Transaction ID : E	398A2938E51734A80882
Purpose of Disbursement				
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		1500.00
Rep. Gwen S. Moore Office Sought: House Disbursen	nent For: 2014	Туре	7	7
	Primary General			
President	Other (specify) ▼			
State: WI District: 04	·			
SUBTOTAL of Disbursements This Page (optional)		······		6500.00
TOTAL This David (last name this the mounts				
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)		, FOR LINE	NUMBER:	PAGE 93 OF 99
TEMIZED DISBURSEMENTS	Use separate schedule(s for each category of the	(oricon oriny	•	¬ ¬
	Detailed Summary Page	21b 27	22 X 23 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Statem	onto move not be cold or a			
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
National Association of Mutual Insu	rance Companies	PAC		
	· .			
Full Name (Last, First, Middle Initial)	ittoo		Date of Disburseme	ant
A. Neugebauer Congressional Commi	illee		M M / D D	/
Mailing Address PO Box 54175			08 12	2013
-				
•	State Zip Code TX 79453		Transaction ID : E	3F3E38BE3C9FB4A13909
Purpose of Disbursement	79453			
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name		Category/		0500.00
Rep. Randy Neugebauer		Type		2500.00
	nent For: 2014			
	Primary General Other (specify) ▼			
State: TX District: 19	Other (specify)			
Full Name (Last, First, Middle Initial)				
B. PAUL TONKO FOR CONGRESS			Date of Disburseme	ent
			M = M / D = D	/
Mailing Address 911 CENTRAL AVENUE			08 12	2013
PO BOX 221 City S	State Zip Code			
	NY 12206		Transaction ID : E	BE1CA9682443044DC899
Purpose of Disbursement				
Political Contribution			Amount of Each Dis	sbursement this Period
Candidate Name Rep. Paul D. Tonko		Category/		1000.00
•	nent For: 2014	Туре		
	Primary General			
	Other (specify) ▼			
State: NY District: 20				
Full Name (Last, First, Middle Initial)				
C. Portman for Senate Committee			Date of Disburseme	
Mailing Address 9856 Archer Lane			08 12	2013
Maining Addition 9000 Archer Lane			12	20.0
•	State Zip Code		Transaction ID · F	BE85E3919FA874F3AAAD
Dublin Purpose of Disbursement	OH 43017		Transaction 12 . 1	
Political Contribution			Amount of Fook Di	ahuwaawaant thia Dawiad
Candidate Name		Category/	Amount of Each Dis	sbursement this Period
Sen. Robert J. Portman		Type		1000.00
	nent For: 2016		,	,
	Primary General			
State: OH District:	Other (specify) ▼			
otate. On District.				
SUBTOTAL of Disbursements This Page (optional)				4500.00
TOTAL This Period (last page this line number only).				

SCHEDULE B (FEC Form 3X)	Han arment 1	fula (s) FC	R LINE	NUMBER:		PAGE	94 O	OF 99
ITEMIZED DISBURSEMENTS	Use separate sched for each category of		(orlean arily aria)			¬		
	Detailed Summary		21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and State	ments may not be sold	d or used by						
or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
National Association of Mutual Ins	urance Compar	nies PAC						
Full Name (Last, First, Middle Initial)								
A. Roskam for Congress				Date of	f Disburser	ment		
Mailing Address PO Box 713				08	12		2013	Y
City	State Zip Code	е		Trong	ection ID	: B8FFFFDI		440000
Wheaton	IL 60187			irans	action ib	: Богггги	<i>-1</i> 204⊑4	440900
Purpose of Disbursement Political Contribution				Amoun	t of Each I	Disburseme	nt this P	'eriod
Candidate Name			gory/				1000.	.00
Rep. Peter J. Roskam Office Sought: House Disburse	ment For: 2014	Ту	rpe		7			
Senate	Primary Ger	neral						
State: IL District: 06	Other (specify)							
Full Name (Last, First, Middle Initial)								
B. RUBEN HINOJOSA FOR CONGR	RESS			Date o	f Disburser	ment		
Mailing Address 10125 N. 10TH STREET, SUITE E				M = M	/ D 12		2013	Υ
Mailing / Mailess 10123 N. 10111 3 TREE1, 3011E				- CO			2010	_
City	State Zip Code	е		Trans	saction ID	: B545C7A7	730EDB	4227B3 <i>A</i>
MCALLEN Purpose of Disbursement	TX 78504							
Political Contribution				Amoun	t of Each I	Disburseme	nt this P	'eriod
Candidate Name		Cate	gory/				1000.	00
Rep. Ruben E. Hinojosa			pe				1000.	.00
	ment For: 2014	امسما						
Senate President	Primary Ger Other (specify) ▼	neral						
State: TX District: 15	Office (specify)							
Full Name (Last, First, Middle Initial)								
C. Scott Garrett for Congress				Date of	f Disburser	ment		
Mailing Address PO Box 905	Mailing Address DO Day 005			M M M	/ D 12		2013	Υ
				00	12		_0.0	
City	State Zip Code	е		Trans	saction ID	: B5F7CCA	B3F6A0	4ABCA1
Newton Purpose of Disbursement	NJ 07860	<u> </u>						3, ()
Political Contribution				Amoun	t of Each I	Disburseme	nt thic D	Pariod
Candidate Name		Cate	gory/	Amoun	. OI LACII I	213Dai 3EIIIE		
Rep. Scott Garrett			pe		,		2500.	00
	ment For: 2014							
Senate President	,	neral						
State: NJ District: 05	Other (specify) ▼							
1.6 2.6 00				_				_
SUBTOTAL of Disbursements This Page (optional)					40.		4500.0	00
,				-		-	-	一
TOTAL This Period (last page this line number only	·)				1 (8)		1. 46	

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 95 C	F 99
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only		26
Any information copied from such Reports and Stater or for commercial purposes, other than using the name		sed by any perso	on for the purpose of soliciting contribut	ions
NAME OF COMMITTEE (In Full)	ie and address of any point	car committee to	Solicit contributions from Such committee	
National Association of Mutual Insu	urance Companies	PAC		
Full Name (Last, First, Middle Initial)				
A. SYNERGY PAC			Date of Disbursement	Y
Mailing Address 6849 OLD DOMINION DRIVE SUITE 222			08 12 2013	
	State Zip Code		Transaction ID : B30E98B38EE1F4	1003880
McLean	VA 22101-3705		Transaction is . Boolsoboole in a	,00000
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this F	nt this Period
Candidate Name		Category/ Type	2500	.00
Office Sought: House Disburser Senate President	nent For: 2013 Primary General Other (specify)			
State: District:	Other2013			
Full Name (Last, First, Middle Initial) B. Walberg for Congress			Date of Disbursement	
			M M / D D / Y Y Y	Υ
Mailing Address PO Box 1362			08 21 2013	_
City S Jackson	State Zip Code MI 49204		Transaction ID : BA64AE43F71884	127296
Purpose of Disbursement Political Contribution			Amount of Each Disbursement this F	Period
Candidate Name Rep. Tim L. Walberg		Category/ Type	1000	.00
	nent For: 2014 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C.			Date of Disbursement	
Mailing Address			M M / D D / Y Y Y	Y
City	State Zip Code			
Purpose of Disbursement	Purpose of Disbursement			اد ماد
Candidate Name		Category/ Type	Amount of Each Disbursement this F	enod
Office Sought: House Senate President State: Disburser	nent For: Primary General Other (specify)	7,77		
			2502	00
SUBTOTAL of Disbursements This Page (optional)		<u> </u>	3500.	.00
TOTAL This Period (last page this line number only)			37500.	.00

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 96 OF 99	
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	INGIVIDEIT.	
II EMILLO DIODONOLIVILIANO	for each category of the Detailed Summary Page	21b	22 23 24 25 26	
	Dotanos Guillinary i age	27	28a 28b 28c X 29 30b	
Any information copied from such Reports and Stater				
or for commercial purposes, other than using the nam	ne and address of any politic	cal committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
$ \; angle$ National Association of Mutual Inst	irance Companies I	PAC		
Full Name (Last, First, Middle Initial)		I		
A. Friends of Brandon Creighton				
			M M / D D / Y Y Y Y	
Mailing Address 326 1/2 North Main Street			08 12 2013	
Suite 110 City	State Zip Code			
Conroe	TX 77301-2885		Transaction ID: B90BC462EB9804D25B96	
Purpose of Disbursement				
Political Contribution		L II	Amount of Each Disbursement this Period	
Candidate Name		Category/	500.00	
Office Sought: House Disburser	nent For: 2014	Туре	000.00	
	Primary General			
President	Other (specify)			
State: District:	(-			
Full Name (Last, First, Middle Initial)				
B. Friends of Mike Henne			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address 8447 Diamond Mill Road			08 12 2013	
City	State Zip Code			
Clayton	OH 45315-9665		Transaction ID : BA2AFC4B147894E1F820	
Purpose of Disbursement				
Political Contribution			Amount of Each Disbursement this Period	
Candidate Name		Category/	150.00	
Office Sought: House Disburser	nent For: 2014	Туре	7 7	
	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
C. Friends of Rich Golick			Date of Disbursement	
Mailing Address 2270 Circus Samuel Farm Way	Markey Address 2000 Or To Miles			
Mailing Address 2372 Simpson Farm Way			08 21 2013	
City	State Zip Code		Transaction ID : BCCD9467E0DA94A79879	
Smyrna	GA 30080-4626		Transaction ID . BCCD9407E0DA94A79078	
Purpose of Disbursement Political Contribution				
Candidate Name			Amount of Each Disbursement this Period	
Canadate Name		Category/ Type	500.00	
Office Sought: House Disburser	nent For: 2014	. 164	7	
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
OUDTOTAL ACRUM			1150.00	
SUBTOTAL of Disbursements This Page (optional)		·····•	1100.00	
TOTAL This Period (last page this line number only)				

S	CHEDULE B (FEC Form 3X)		<u> </u>	OD 1 12	NE NUMBER: PAGE 97 OF 99
	EMIZED DISBURSEMENTS	Use separate schedule(s	s) (_	NE NUMBER: PAGE 97 OF 99 only one)
• •	LIVIIZED DISDUNSLIVILINIS	for each category of the Detailed Summary Page			1b 22 23 24 25 26
_		Detailed Summary Page		27	7 28a 28b 28c 🔀 29 30b
	ny information copied from such Reports and Stater				
	for commercial purposes, other than using the name				
	NAME OF COMMITTEE (In Full)				
$ \rangle$	National Association of Mutual Insu	ırance Companies	PAC	;	
\angle	Full Name (Last, First, Middle Initial)				
Δ	Friends to Elect Burt Jones				Date of Disbursement
- 41	THEHUS TO ETECT DUIT JUHES				M M / D D / Y Y Y Y
	Mailing Address 407 East Second St.				08 21 2013
		State Zip Code GA 30233-2035			Transaction ID : B71550CD37B754BD4BC
	Jackson Purpose of Disbursement	GA 30233-2035			
	Political Contribution				Amount of Each Disbursement this Period
	Candidate Name			tegory/	·
				Гуре	300.00
	Office Sought: House Disburser	nent For: 2014			
		Primary General			
	President State: District:	Other (specify) ▼			
_					
В.	Full Name (Last, First, Middle Initial)				Date of Disbursement
υ.	Geanie Morrison Campaign				
	Mailing Address 1501 East Mockingbird Lane				08 12 2013
	Suite 101				
		State Zip Code			Transaction ID : B7323C02F4F1442E88B4
	Victoria Purpose of Disbursement	TX 77904-2178			
	Political Contribution				Amount of Each Disbursement this Period
	Candidate Name			to a o m //	7
				tegory/ Type	500.00
	Office Sought: House Disburser	nent For: 2014	-		
		Primary General			
	President	Other (specify) ▼			
_	State: District:				
_	Full Name (Last, First, Middle Initial)				Date of Disbursement
C.	Jay Shaw Campaign				
	Mailing Address 39 Valdosta Road				08 21 2013
	g viving of valuesia riead				
	City	State Zip Code			Transaction ID : BF1BF02A39A8A4660A13
	Lakeland Dishurasment	GA 31635-6652			
	Purpose of Disbursement Political Contribution				1
	Candidate Name		با ⊢		Amount of Each Disbursement this Period
				tegory/ Type	300.00
	Office Sought: House Disburser	nent For: 2014	1		
	Senate	Primary General			
	President	Other (specify) ▼			
_	State: District:				
					1100.00
Ls	SUBTOTAL of Disbursements This Page (optional)			······ Þ	1100.00
١,	OTAL This Period (last page this line number only)				
	VIAL THIS I CHOO (last page this line humber Offly)				• [

S	CHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 98 OF 99				
	EMIZED DISBURSEMENTS	Use separate schedule(s	.\ I					
• •		for each category of the Detailed Summary Page	_ `	21b	22 23 24 25 26			
_		Dotailed Guillillary Lage		27	28a 28b 28c 🗙 29 30b			
	ny information copied from such Reports and Stater							
or	for commercial purposes, other than using the name	ne and address of any poli	tical co	mmittee to	o solicit contributions from such committee.			
$ \setminus $	NAME OF COMMITTEE (In Full)							
]/	National Association of Mutual Insu	urance Companies	PAC	;				
<u></u>	Full Name (Last, First, Middle Initial)							
A.	John Smithee Campaign				Date of Disbursement			
		M M / D D / Y Y Y Y						
	Mailing Address Post Office Box 2910				08 12 2013			
	City							
	Austin	State Zip Code TX 78768-2910			Transaction ID : B2780E9F784E6472082C			
	Purpose of Disbursement							
	Political Contribution				Amount of Each Disbursement this Period			
	Candidate Name			tegory/	500.00			
	Office Sought: House Disburser	ment For: 2014		Туре				
		Primary General						
	President	Other (specify)						
	State: District:							
	Full Name (Last, First, Middle Initial)							
В.	Kenneth F. Sheets for State Rep				Date of Disbursement			
	Malling Address B. J. I. I. I. B. Wass							
	Mailing Address Postal Mail Box #869	08 12 2013						
	City	State Zip Code			Transaction ID : BB2FB1B9723324A87B88			
	Dallas	TX 75214			Transaction ID : BBZFB1B9/23324A6/B00			
	Purpose of Disbursement Political Contribution				Amount of Fools Diskumsonsont this Davied			
	Candidate Name		با	لبت	Amount of Each Disbursement this Period			
				tegory/ Type	500.00			
	Office Sought: House Disburser	ment For: 2014		. 7 -	,			
		Primary General						
	President	Other (specify) ▼						
_	State: District:							
C.	Full Name (Last, First, Middle Initial)				Date of Disbursement			
	Van Taylor Campaign				M M / D D / Y Y Y Y			
	Mailing Address Post Office Box 1767				08 12 2013			
	,	State Zip Code TX 75026			Transaction ID : B7E1ABEDF617F4E60B02			
	Plano Purpose of Disbursement	TX 75026						
	Political Contribution				Amount of Each Disbursement this Period			
	Candidate Name		Ca	tegory/				
				Туре	500.00			
		ment For: 2014						
	Senate President	Other (specify) General						
	State: District:	outer (specify) ▼						
Г	· L							
s	BUBTOTAL of Disbursements This Page (optional)				1500.00			
\vdash								
T	OTAL This Period (last page this line number only))						

SCHEDULE B (FEC Form 3X)		FOR LINE I	NUMBER:	PAGE 99 OF 99		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)				
	Detailed Summary Page	21b 27	22 23 28b	24 25 26 28c × 29 30b		
Any information copied from such Reports and Statem	l nents may not be sold or use	ed by any perso				
or for commercial purposes, other than using the nam						
NAME OF COMMITTEE (In Full)						
National Association of Mutual Insu	rance Companies P	AC				
Full Name (Last, First, Middle Initial)						
A. Workman for Texas	Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 4415 R.O. Drive						
City	Transaction ID : BD89C6B64D9894A25A3					
O p.30.000	TX 78669-6883		Transaction is 1 Si	7000000 12000 17 1207 10		
Purpose of Disbursement Political Contribution		Amount of Each Disbursement this Period				
Candidate Name		Category/ Type		500.00		
Office Sought: House Disbursem	nent For: 2014	туре	7	7		
	Primary General					
President State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
B.	Date of Disbursement					
		M M / D D / Y Y Y Y				
Mailing Address						
City	State Zip Code					
Purpose of Disbursement						
Candidate Name			Amount of Each Disbursement this Period			
Canadate Name		Category/ Type		7		
Office Sought: House Disbursem						
	Primary General					
State: District:	Other (specify) ▼					
Full Name (Last, First, Middle Initial)						
C.	Date of Disbursement					
Mailing Address	M M / D D / Y Y Y Y					
City	State Zip Code					
Purpose of Disbursement						
Candidate Name	Category/	Amount of Each Disk	bursement this Period			
Office Sought: House Disbursem	nent For:	Type		7		
	Primary General					
	Other (specify) ▼					
State: District:						
SUBTOTAL of Disbursements This Page (optional)				500.00		
SOBIOTAL OF DISDUISEMENTS THIS Page (optional)		·····		1		
TOTAL This Period (last page this line number only).				4250.00		